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of
MIDLOTHIAN AND PEEBLES


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LONDON SCHOOL OF HYGIENE
AND TROPICAL MEDICINE

ANNUAL REPORT

ON

School Health Administration

For the Year Ended 31st July 1963



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For the Year Ended 31st July 1963

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I. LIST OF STAFF

School Medical Officer: JOHN RIDDELL, O.B.E., M.D., D.P.H.

Deputy Medical Officer: †HAROLD J. FRASER, M.B., Ch.B., D.P.H.
*LEWIS F. HOWITT, M.B., Ch.B., D.P.H.

Assistant Medical Officers:

CHARLOTTE E. FORSYTH, M.B., Ch.B., D.P.H.
JEANETTE B. MORRISON, L.R.C.P. & L.R.C.S.(Edin.), C.P.H.
MARGARET MACKENZIE, L.R.C.P. & L.R.C.S.(Edin.), C.P.H.
ROBERT S. SLOAN, M.B., Ch.B., D.P.H.
MAIRI H. LACK, M.B., Ch.B., D.P.H.
EILEEN REDDY, L.R.C.P. & L.R.C.S.(Edin.), D.P.H.
MARY D. GARDNER, M.B., Ch.B.

Senior Dental Officer: ROBERT P. NEILSON, O.B.E., L.D.S.

Assistant Dental Officers:

T. McLAREN, L.D.S.	JOHN W. SWAN, L.D.S.
J. B. CLARK, L.D.S.	R. W. BRAZENALL, L.D.S.
N. P. THOMSON, B.D.S.	R. A. HODGKINS, L.D.S.
B. McLEAN, L.D.S.	K. S. MACPHAIL, L.D.S.
†HELEN McLEAN, L.D.S.	S. RICHARDSON, B.D.S.
F. C. RODGERS, L.D.S.	

County Nursing Superintendent:

JEAN M. TINCH, R.G.N., S.C.M., H.V., Q.N.

Administrative Assistant: ROBERT FULTON

* **Superintendent Physiotherapist:** C. A. MACMILLAN, M.C.S.P.

	<i>Midlothian</i>	<i>Peebles</i>
Deputy Nursing Superintendent	1 (†1. *1)	—
Senior Health Visitor	1	—
Physiotherapists	5 (*1)	—
Dental Auxiliary	1 (*1)	—
Dental Surgery Assistants	11 (*3. †3)	—
Office Staff	12 (*1. †1)	—
Health Visitors	24 (*5. †6)	1
District Nursing Sisters—Health Visitors	11 (*2. †2)	5 (*1)
Cleanliness Inspectresses	2	—

CONSULTANTS

Ophthalmic Surgeon: G. S. DHILLON, M.B., B.S., F.R.C.S.E., D.L.O.

Orthopaedic Surgeons:

G. A. POLLOCK, M.B., Ch.B., F.R.C.S.E., M.S., F.A.C.S., D.P.H.—Midlothian
G. W. BAKER, M.B., Ch.B., F.R.C.S.E., M.Ch.Orth.—Peeblesshire

Orthodontic Surgeon:

W. RUSSELL LOGAN, O.B.E., L.R.C.P. & S.(Edin.), F.D.S., H.D.D.

Dental Anaesthetist:

G. MACGREGOR ROSE, L.R.C.P., L.R.C.S.(Edin.), L.D.S., D.A.

* Appointed during year. † Resigned during year.

(The above staff undertake both public health and school health duties.)

REPORTS

on

SCHOOL HEALTH ADMINISTRATION

for the

For the Year Ended 31st July 1963

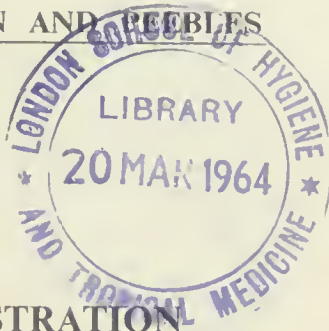
The following Report is prepared in accordance with the instructions of, and in the form approved by the Scottish Home and Health Department.

PREFACE

General

In the Circular issued with reference to the present Report, the Secretary of State invites Authorities to consider the efficiency of certain aspects of their school health service. It is alleged for example that many defects are missed at routine medical inspection because of insufficient time, insufficient background information, and poor working conditions. Is this true of this area?

In Midlothian and Peeblesshire pre-school children are given a special written invitation to attend the child welfare clinic at the age of $2\frac{1}{2}$ years for medical check-up and at $3\frac{1}{2}$ and $4\frac{1}{2}$ years for medical and dental check. The vast majority of mothers bring their children and this has given us the opportunity to compare findings at child welfare clinics at the age of $4\frac{1}{2}$ years with findings for the same children a year later at routine school inspections. In all, the records of 1,420 children (approximately 60% of the



children in that year group) who had been examined on both occasions were compared with the following findings.

Defect	Present on both occasions	4½ years only	5½ years only
No defect	271	131	260
Minor defect (temp.)	115	143	156
Major defect	11	1	4
Knock knee 2 inches or more	35	55	4
Enlarged tonsils	12	61	11
Bronchitis: asthma	3	8	6
Eczema	—	12	—
Vision defect over 6/12 (one or both eyes)	—	—	15
Squint	26	22	8
Enuresis	5	39	6

This gives 39% of the children with some defect at 4½ years and 29% with some defect at 5½ years which would appear to be at least a reasonable degree of ascertainment.

Dealing with some of the individual defects where there is a fall in incidence from 4½ years to 5½ years, it is well known that knock-knee is a defect which cures itself just about this age. Enlarged tonsils present at 4½ years are largely removed before entry to school owing to parental pressure to have the child "well" before school entry. The considerable number of children with eczema at 4½ years is interesting, but again this is most frequently a self curing condition. With regard to visual defect the explanation probably is that many of the 4½-year-old children with squint were merely noted at 5½ years as having defective vision.

The only figure which leads one to suspect inadequacy in the 5½-year-old records (and not in the inspection) is that for enuresis. For this information one is almost entirely dependant on information from the parent who is present at the 4½-year examination and in only two out of three cases at the 5½-year examination. Although the parent is asked on the report form in advance, this information is not always vouchsafed.

The conclusion one would draw from this is that the routine examination on entry is efficiently carried out and is worthwhile though background information is not always complete.

In this connection mention is made of absenteeism records in the Circular. In this area these are provided by the teaching staff before routine examinations, and in addition at the end of

each term we receive for follow-up a list of all pupils who have made less than 50% attendance during the term. When children are found to have defects requiring attention they are thereafter seen regularly by the medical officers until clear. In practice, the medical officers visit each school on average at least once each month. In addition, the health visitors visit each school in their areas at least once each week.

The suggestion is made in the Circular that the routine examination at 9 years of age might be unnecessary. In my Report for 1960-61 I gave the results of an enquiry on this matter which indicated that this examination did have value and should be continued.

A request is made that colour vision testing should be introduced. It is now 6 years since this was begun as a pioneer scheme in this area.

In this connection, mention was made in last year's Report of the trials we were carrying out with a 3 metre test card. It can now be said that with a properly constructed card such as that produced by Messrs. Hamblin, the test is thoroughly reliable.

Finally the Circular stresses the need for adequate medical inspection facilities if good work is to be done. This is something which has been appreciated very fully in Midlothian and Peeblesshire and the Health and Education Committees are to be congratulated on having achieved the position where conditions which can be said to be unsatisfactory have been practically eliminated. This is a state of affairs which cannot be bettered anywhere.

Staffing

This year has seen somewhat less upset than usual. On the medical side the only loss was Dr Fraser who retired after many years' valuable service. He was succeeded by Dr Howitt. We were also able to recruit a superintendent and a fifth physiotherapist and at last extend this service to the western part of the County of Midlothian. We also recruited a dental auxiliary and this is helping considerably in that field. The health visiting establishment showed many changes but we were, with great difficulty, able to maintain our numbers.

Medical Services

Orthopaedics

With the recruitment of additional staff much progress is now being made, though temporarily delayed through illness.

At the end of a very successful year we can say that the swimming sessions being held at Dalkeith High School after school hours are now very much a part of the physiotherapy set-up. The numbers do not increase drastically mainly because of the discrimination of the consultant and the need for individual attention by the physiotherapist in the water.

Five of the patients were admitted to the Princess Margaret Rose Hospital for operative treatment and on completion of same carried on post-operatively at the baths.

One young girl from Roslin Special School (a spastic child), and a boy from Newtongrange School, both under specialist care at the Sick Children's Hospital, were put on treatment at the request of their consultants. The staff is pleased to think that "outside" people know of their work.

Outside of the fact that swimming increases the physical stature of the child it does as much for the mental attitude. It is noteworthy that one boy, having gained his bronze life-saving badge, and another lad with the same handicap (Poliomyelitis affecting the legs) have decided to enter for the Duke of Edinburgh Award Scheme.

One girl from Roslin Special School (a hemiplegia) now left school and working, gave us a lot of satisfaction when after two years hard work she swam without any aids. Again, when we get patients thrilled to be free of leg irons and other encumbrances just gambolling in the water, there is great satisfaction in controlling this feeling and channelling it into hard work for their own good.

Weather like last winter is no inducement to anyone to come out in the evenings, yet for all that, all thirty-six sessions each for boys and girls were kept at a respectable figure, children attending from Danderhall, Dalkeith, Bonnyrigg, Easthouses, Newtongrange, Gorebridge, Rosewell, Loanhead, and Penicuik.

The co-operation of the Education Authority Staff and the other voluntary helpers is greatly appreciated.

Health Education

From the details given in Tables XXII-XXIII and XXIII A it will be evident that considerable progress is being made in this field. Further extension into the primary schools and greater participation by the teaching staff in this work is confidently anticipated.

Prevention of Accidents

During the summer term a Home Safety Campaign was held in the Primary schools in Midlothian. The opportunity was taken of trying a different approach to Health Education in that the actual teaching was carried out by the class teachers themselves and that posters and teaching aids were issued by the Health Department to the teachers.

There are several advantages in such an approach provided the full co-operation of head teachers and class teachers is obtained. Teaching in school by a medical officer or health visitor has its limitations because of the obvious disruption of the normal teaching programme. Specific times have to be set aside for these "visitors" and this involves a lot of re-adjustment of timetables which in many cases is not possible. If the class teacher carries out the teaching it can be fitted in at odd times during the day and the total time thus spent may well be greater than that set aside for the doctor or health visitor. In addition, the teacher knows her class better and can adjust her teaching to cater for all members, which is not possible for a "visitor".

In practice, a letter was sent by the Director of Education to all head teachers informing them of the Home Safety Campaign. Two types of pictures, with prepared short notes, presenting the danger points in a house were allocated to all schools. Short teaching notes which were extracted from Dr A. G. Mearns "Teaching Health", plus a few general observations were also issued in time for the campaign which took place from 10th to 14th June.

In order to try and obtain an indication of "safety awareness" of children before and after the campaign, questionnaires were issued to the Primary 7 classes of certain of the schools taking part in the campaign. The questionnaire was the same for both pre- and post-campaign assessment, and consisted of eight

questions largely based on Dr I. A. G. MacQueen's "A Study of Home Accidents in Aberdeen".

The answers given by 1,080 children who took part in the two quizzes showed a marked improvement in Safety Awareness following the campaign. The results are tabulated below.

Total 1,080	No. of correct answers Question No.								Total
	1	2	3	4	5	6	7	8	
Before	366	543	190	971	746	788	293	660	4,557
After	754	743	351	904	903	1000	573	735	5,963

Following the campaign, all head teachers whose schools took part in the "before and after" quiz were invited to submit their observations on this method of Health Teaching. Replies were received from ten head teachers and of those, eight were strongly in favour of this type of approach.

Enuresis

In response to enquiries from parents about the pad and bell system of treatment for Enuresis a trial was made with a Sentinal Alarm and found to be most successful in effecting a cure. During the year 1962-63 four boys and one girl (between the ages of 9 and 11 years) have used the apparatus, each retaining it for a period of 3 months. The children have co-operated well, with 100% success and no relapses have been reported. The parents have been most grateful. There is now a waiting list of enuretics who are anxious to try this form of treatment and we have four sets of Alarms in use.

Dental Service

Mr Neilson, Senior Dental Officer, reports as follows:—

The school year commenced in August 1962 with dental officer establishment at authorised level, but a shortage of two dental surgery assistants retarded the work to some extent until suitable successors were appointed and initiated to local authority work—the clerical side of which is quite different from that of the general practitioner. A further resignation was received from a dental

surgery assistant on account of marriage during December and a successor appointed in January.

Mrs MacLean—a dental officer in the Musselburgh area resigned during May but her successor Mr H. M. MacKintosh, was unable to join the staff until the new school year.

Staff changes have an unsettling effect and always create problems which are temporary but detrimental to the output of work and this is aggravated by absence due to illness. Altogether 99 dental officer sessions and 75 dental surgery assistant sessions were lost on account of illness etc. This is equivalent to a loss of approximately 10 weeks' work in the case of dental officers and $7\frac{1}{2}$ weeks for dental surgery assistants and of course dental officers and their respective surgery assistants are never on sick leave simultaneously! The Dental Auxiliary lost 14 sessions through illness.

An interesting feature of the Year was the appointment on 3rd September 1962 of Miss Olive Young as a dental auxiliary. This is a type of ancillary dental worker for whom provision was made in the Dentists Act of 1957. These girls receive a two years course of intensive training at the School for Dental Auxiliaries at New Cross General Hospital, London, under the control of the General Dental Council which has been instructed by the Privy Council to carry out this experimental scheme in order to discover its value or otherwise to the community. Auxiliaries are trained to work only in the Local Authority and Hospital Services under the direct supervision of a dental surgeon who examines the patients and prescribes the treatment. They provide dental treatment for children and are taught to do simple fillings, to extract milk teeth, to clean scale and polish teeth and to give instruction in Dental Health Education. Regular reports are submitted to the General Dental Council by all participating Authorities throughout Scotland, England, Wales and Northern Ireland. Miss Young is employed in the Newtongrange-Gorebridge area.

A summary of the orthodontic work appears on Tables XX and XXA of the Appendix. This scheme, which covers both Counties remains exceedingly popular and the demand correspondingly keen. It is necessary for this reason to restrict the number of cases undergoing treatment at any one time, both to ensure adequate patient control and that normal dental treatment

procedures are not in any way neglected as a result of over-enthusiasm.

The dental officers wish to record their appreciation to the Orthodontic Consultant, Dr Logan, for his keen interest in their work and for the practical help and advice always readily available.

The waiting list for general anaesthetics still continues to increase in length and it is quite impossible to overtake it under present conditions. It is anticipated, however, that it will be possible at some future date to increase general anaesthetic sessions to five per week in accordance with the provision already approved by Council.

Dr MacGregor Rose, the Anaesthetist, carries out a very difficult task especially with the very young, in a most pleasant and highly efficient manner and all members of the dental staff wish to express their gratitude to him.

In the latter part of the session High Speed Air Rotors and Compressors (which had been slightly modified for the sake of portability) were provided for the use of six dental officers and it is anticipated that results will amply justify the provision of a further six "High Speed Units" in the current year for the remaining dental officers. This expenditure has already been approved in a previous budget.

The two mobile dental units continue to serve in those areas of both Counties where suitable static clinic facilities are not available. They do suffer considerably, however, from the effects of wear and tear and constant exposure to all kinds and conditions of weather. The Midlothian Unit, which came into service in July 1951, has now developed serious roof leakages which have been sealed temporarily but which may require very extensive repair work to make weather-proof again.

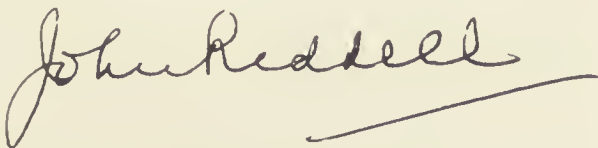
A Study Group consisting of representatives of the Local Authority Organisations and the Scottish Home and Health Department was set up in June 1962 and circulated its "Report on Local Authority Dental Services" in June 1963. It contained numerous recommendations and suggested various ways of increasing the efficiency of the service throughout Scotland. It advised the introduction of standardised day books and return forms reckoned to reduce clerical work to a minimum and thus to increase the time available for clinical procedures. It stressed

the importance of prevention of dental disease by means of dental health education and fluoridation.

In conclusion, all the members of the dental staff desire to acknowledge their indebtedness to Head Teachers, Class Teachers, Medical Officers, Health Visitors, District Nurses, and staff of the County Health Department for continued help and co-operation throughout the year. Sincere thanks to the County Transport Officer of Midlothian, and the County Surveyor of Peeblesshire must also be recorded for the highly efficient manner in which Mobile Dental Clinics and equipment have been safely transported throughout the Counties, also for routine maintenance work carried out by their respective staffs.

Acknowledgments

I would wish to acknowledge the support of the various Committees of the two Councils. I would also express my thanks to all the staff of the Education Departments for their help by precept and example in moulding the future outlook and behaviour of the pupils. To all my own staff for another excellent year's work, I am also grateful.

A handwritten signature in dark ink, reading "John Reddell". The signature is fluid and cursive, with a long horizontal stroke extending to the right from the end of the name.

Medical Officer of Health.

HEALTH DEPARTMENT,
10 DRUMSHEUGH GARDENS,
EDINBURGH, 3.
30th October 1963.

ORGANISATION AND ADMINISTRATION

This is as given in the Report for 1958-59.

First Aid Appliances in Schools

As mentioned in last year's Report, this service has now been re-organised with differing types of "boxes" being used. For convenience, these have been named—Central, Departmental, Technical, Gymnasium and Classroom Boxes.

Larger schools are issued with a number of boxes for different departments, and a list of the contents of each box is given in a separate sheet (where applicable). The location of the boxes is at the discretion of the Head Teacher.

Two of the boxes require special mention.

- (1) In schools with a nearby playing-field, the Gymnasium Box is fitted so that it can also be used on the Playing-field.
- (2) In Primary Schools with Infant Classes, a "Classroom Box" is also issued for such classes. This box contains just a few articles of equipment for very minor injuries—the idea being that such injuries can be treated by the teacher without the need for the child to leave the classroom.

Replenishment is made from the Head Office on request by the Head Teacher.

School Closure

No schools or classes were closed for Public Health reasons during the year. 2,543 children (Midlothian, 1927, Peebleshire, 616) suffering from infectious diseases were temporarily excluded during the session. Details are given in Tables X (Midlothian) and XA (Peebleshire).

MIDLOTHIAN

GENERAL STATISTICS

Number of Schools:—

(a) Primary	} under Education Authority {	.	.	55
(b) Secondary		.	.	11
(c) (1) Special Schools		.	.	1
(2) Special classes in ordinary schools		.	.	2
(3) Occupational Centres		.	.	2
(d) In receipt of grant from Education Authority and under medical inspection		.	.	—
Number of children on the registers	.	.	.	20,253
Number of children in average attendance	.	.	.	18,705

SANITARY CONDITIONS OF SCHOOLS

I am indebted to the County Architect for the following information.

New School Buildings and Extensions

The following works were completed or were substantially completed by 31st July, 1963.

Currie New Primary School No. 2.—This new single-stream Primary School has been erected on a site adjoining the playing field of Currie Secondary School.

Easthouses Combined New Primary and R.C. Schools.—This large scheme provides a two-stream Public Primary School and a single-stream R.C. Primary School with mutual use of certain facilities including a Combined Purposes Clinic.

Esk Valley College.—A further timber extension has been provided.

Lasswade Secondary School Extension.—This is a very substantial extension to an already large Secondary School.

Alterations and additions to provide internal toilets were completed at the following Schools:—

Balerno, Bellsquarry, Borthwick, Carrington, Cranston, Howgate, Kings Park and Pumpherston.

The equipping of kitchens was carried out at the following schools:

Cuiken, Danderhall, Wallyford and Woodburn.

The erection of the following new schools is in progress:—

Currie New Secondary. Gorebridge New Primary.

West Calder New High. Loanhead New R.C. Primary.

East Calder New R.C. Musselburgh New Burgh Primary.

Additions to the following schools are also being carried out:—

Cuiken Primary, Ratho Primary and Woodburn Primary.

THE FINDINGS OF MEDICAL INSPECTION

Number Examined.—In accordance with D.H.S. Circular 58/1962 the following groups of children underwent systematic inspection:—

- (1) Entrants (children entering school for the first time).
- (2) Pupils born in 1955 (Visual Acuity and Hearing only).
- (3) Pupils born in 1953.
- (4) Pupils born in 1949.
- (5) Pupils born in 1946.
- (6) Other systematic examinations—pupils not previously subjected to detailed routine inspection, as well as those, who, because of absence for any other reason, were missed in the age group the previous year.
- (7) Special examinations—pupils examined at the request of parents, teachers or health visitors.
- (8) Re-examinations—pupils found at previous inspections to be suffering from disease or defect and recommended by Medical Officers for re-examination.

In addition children attending Trek Camps, Swimming Instruction, etc., were medically examined under special arrangements, and altogether 18,266 examinations were made by Medical Officers during the year, full details being given in Table I.

Parents Present.—The number of parents present at routine examinations was 2,638 for 6,399 children of all ages or 41·22%. The following figures show the number of children in the different age groups who were accompanied by their parents:—

	Examined	Parents Present	%
Age 5	2380	1640	68·9
Age 9	2000	900	45·0
Age 13	1801	95	5·2
Age 16	218	3	1·3
	<u>6399</u>	<u>2638</u>	<u>41·2</u>

The over-all percentage of parents attending routine examinations shows a small increase on last year's figures. We should of course like the percentage to be higher, as it is of great benefit if the doctor and parent can have a short informal talk.

Clothing and Footgear.—Clothing was found to be unsatisfactory in 0.09% of cases, and unsatisfactory footgear was found in 0.03% of cases.

Smallpox Vaccination.—78.9% of the children examined as “routines” were found to be vaccinated.

Uncleanliness.—The position with regard to uncleanliness is given in Tables III, VII and VIII. It will be seen that in routine examinations, where the parents are warned beforehand, 1.2% of 5-year-old girls, 1.0% of 9-year-old girls and 0.6% of 13-year-old girls had infested heads.

Following the cleanliness inspections at the beginning of the Autumn Term a review was again made of all the cleanliness returns made in respect of schools over the past three years. In seventeen schools where a satisfactory standard of cleanliness and hygiene in the pupils had been consistently maintained it was decided to forego the cleanliness inspections at the beginning of the Spring and Summer Terms, thus effecting a further saving in loss of educational time. Arrangements were made for close liaison to be maintained between the appropriate Head Teachers and Health Visitors concerned so that any cases of head infestation, etc., being found would be dealt with as soon as possible. Three such special cases were notified.

A total of 52,274 special examinations for uncleanliness were made in the schools at the beginning of each term by the Health Visitors acting in their capacity as School Nurses. During the year 375 children were reported as suffering from nits and 19 were reported as suffering from head vermin. This represents approximately only 1.5 per cent. of the total school population as suffering from this obnoxious condition. As will be seen from Table VIII, 345 of these cases were cleaned up during the year and at the end of the session 34 cases had improved, 5 cases still remained as not improved and were being followed up at home during the school holidays, and 1 case had left school.

A summary of the number of cases seen, etc., is as follows:—

Number of cases referred by Health Visitors	228
Number of cases examined by Cleanliness Inspectresses	228
Number of Statutory Notifications issued by County Clerk following representations by Medical Officer	1
Number of children cleansed and free from infection at last examination—	
Following parents' permission to cleanse	24
Following Statutory Notice	1
Following cleansing by parents at home	175
	<hr/>
	200
Cases left school before cleansing completed	
Cases under supervision	28
	<hr/>
	228
Number of treatments carried out by Cleanliness Inspectresses—	
Following parents' permission	231
Following Statutory Notice	3
	<hr/>
	234

In addition to treatments the Inspectresses in their follow-up work carried out 2,731 reinspections of infected children. The Inspectresses also made 370 home visits, the value of which is borne out by the fact that 175 children were cleansed by the parents at home where, of course, the main problem of uncleanness lies. The majority of parents with whom the Cleanliness Inspectresses come in contact are now much less aggressive in their reception and an indication of this is seen in the fact that while only 1 Statutory Notice was issued, 24 children were cleansed by the Cleanliness Inspectresses following interviews with the parents.

The Inspectresses assisted at the term cleanliness examinations, and also assisted at Eye Clinics, Orthopaedic Clinics, Poliomyelitis Vaccination Clinics, etc., thereby freeing Health Visiting staff for other duties.

Skin Conditions.—The incidence of these is dealt with in Tables III, VI and IX. The cases found at routine inspection were 162 or 2·54%.

Nutrition.—0·98% of the children at routine inspection were found to be slightly undernourished.

The average heights and weights of the children examined in routine inspections are given in Table II.

Mouth, Nose, Throat and Glands.—The position here is satisfactory, not more than 2·26% of the children being found with serious defect. Enlarged tonsils requiring observation at 5·45%

and enlarged glands at 4.50% formed the largest groups of the total number of children examined.

Vision.—264 children were found at routine inspection to have a degree of defective vision which required further investigation by the School Ophthalmologist at Eye Clinics. A total of 1,522 children were examined at Eye Clinics during the year. Details are given in Table XI. Of the children examined, 566 were being seen for the first time and 347 of these had glasses prescribed. 956 were children being called for routine follow-up, etc., and 501 had glasses prescribed. It will be noted that in only 1 case did the parents refuse to take any action. This case is being “followed-up”. Our Ophthalmic Services are operated under the National Health Service (Scotland) Act, the Local Authority only making appointments for examination and providing the clinic premises. Of the 2,380 5-year-old children tested, 81 were referred to the Oculist and 49 had spectacles prescribed.

External Eye Disease.—Cases of external eye disease were rare except for squints (1.95% of routines) which were dealt with as defective vision cases.

Ears and Hearing.—0.77% of routine cases suffered from diseases of the ears. From Table VI it will be seen that 50 of all known cases of otorrhoea had been cleared up by the end of the school session. Hearing tests at routine medical inspections, necessarily inaccurate because of lack of accurate means of testing, showed that 1.81% of the children tested suffered from some degree of loss of hearing.

In the routine audiometric tests the groups tested were those children born in 1957 (5-year-old age group), 1955 (7-year-old age group) and 1951 (11-year-old age group). In addition there were also tested special cases referred from medical inspections and other sources, and retests were carried out on children reported as defective from last audiometric tests. Any 1957, 1955 and 1951 age group children were included with their respective age groups and not in the “retest” group. Altogether 6,860 children were tested and details are given in Table XII.

During the year 34 children were referred to the Aurist for special investigation. The Aurist's findings were as follows:—

Post Meningitis	1
Perforations, both ears	4
Middle ear deafness	3
Both drums indrawn	1
Tonsils and adenoids enlarged	12
Tonsils and adenoids enlarged and Cleft Palate and Hare-lip	12
Polypus	1
Extensive wax both ears	2
Nerve Deafness	1
Defect of little or no severity, no treatment necessary .	4
	—
	30
Failed to keep appointments	2
Awaiting appointment	2
	—
	34
	—

Treatments recommended were as follows:—

Operative treatment	16
Drops and inhalations	3
Syringing and general cleansing	1
No action necessary at this time, but observe	5
Hearing Aid	5
	—
	30
	—

In all of the foregoing cases, General Practitioners were advised of the action being taken, and of the Aurist's recommendations. Where necessary Head Teachers were sent special reports for inclusion in Pupils' Progress Record Cards (Section IX Medical Reports) and were asked where appropriate to arrange for special seating in class. All cases are kept under regular observation at school.

Speech.—Following routine examination 74 children were reported as suffering from articulatory defects and 10 from stammering. Altogether there are 575 children at school known to be suffering from defective speech (535 articulatory defects and 40 stammering). A large number of these children are in attendance at schools not visited by the Speech Therapist. The following

report is made by the Speech Therapists who are on the staff of the Director of Education:—

Cases carried forward from Session 1961-62	246
New cases admitted for treatment, Session 1962-63	234
Cases discharged or left, Session 1962-63	160
Cases on Treatment Register at end of Session 1962-63	320

Mental and Nervous Condition.—171 children (2·67%) were noted at routine inspection to be mentally backward or to suffer from behaviour difficulties. Most of these children, of course, are dealt with as special cases. Mental testing of backward children, however, is confined to those referred as likely to require certification, or transfer to a special school or special class in an ordinary school, and the reassessment of children already in attendance at special schools or classes. 131 such children were examined by School Medical Officers during the year.

Recommendations in regard to Education were made as follows:—

Education in Ordinary School	3
Education in Ordinary School with special educational treatment as an educationally sub-normal pupil	21
Education in Special School (Day) (includes 3 recommended for Occupational Centre)	18
Remain in Special School or Class or Occupational Centre	60
Reported under Sec. 65, Educ. (Scot.) Act, 1962	4
Reported under Sec. 66, Educ. (Scot.) Act, 1962	14
No Report considered necessary under Sec. 66, Educ. (Scot.) Act, 1962	5
Referred for further assessment	6
	<hr/>
	131

Of the above, 60 were children already attending Special Schools or Classes who are given regular reassessment examinations. The remaining 71 children were in ordinary schools, 36 being examined specially for the first time and 35 being given routine follow-up examinations. The average age of the children examined for the first time at school was 7 years.

During the year 18 children were allotted vacancies in Special Schools or Special Classes.

Throughout the year 4 children were referred to the Psychiatrist, Dept. of Psychological Medicine, Royal Hospital for Sick Children. Cases are generally brought to the notice of the Health Department by assistant medical officers, educational psychologist, health visitors or class teachers. In all cases the general practitioners are consulted, and they are sent copies of all subsequent reports by the Psychiatrist. The reasons for referral this year were as follows:—

Refusal to attend school	2
Behaviour difficulties at home and at school	1
Soiling	1

The Psychiatrist reports that including the above there are 170 children from this area under supervision at the Department of Psychological Medicine.

Heart Disease.—69 children (1·08%) examined at routine inspection were found to suffer from some heart abnormality, but in 49 of these cases the disability was of a temporary nature only.

Lungs.—88 (1·38%) routine examinations were found to have an abnormal condition of the lungs.

Skin testing and, if necessary, B.C.G. vaccination against tuberculosis was offered to all school children known to be contacts of cases of tuberculosis. Acceptances were received for all these children and the results were as follows:—

No. of Contacts	Heaf Tested		B.C.G.		X-rayed
	Negative	Positive	Given	Awaiting	
51	42	9	42	—	9

Of the nine children X-rayed one was found to be a case of tuberculosis. Three are under observation, and five children were found to have clear films.

Requests for diagnostic tests were made for eight other children who were negative.

Continuing the scheme for protection of school leavers, 95·4% of the 13-year-old group of children, for whom parental consent was received, were skin tested, and children given B.C.G. vaccination or chest X-ray examination according to the results. X-raying of positive reactors to the skin testing (22% of whole) showed no evidence of infection. No cases of Tuberculosis were found.

Fuller details of the skin testing etc. are given in Table XXI.

Deformities.—572 (8·94%) routine cases had some form of physical deformity.

General Statement of Defects.—Table IV gives a summary of the position of the routine inspection cases classified according to the degree or type of defect present. It will be seen that 58·2% of these examined were free from all defects.

Table V gives the total numbers of exceptional children in the Area.

The 2 children in the grade 2 (*a*) (partially sighted) group attending the ordinary school are in the infant department and were admitted to the ordinary school pending the possibility of transfer. These children are kept under regular supervision and no change in educational facilities is yet considered necessary.

The 4 children in the grade 6 (*b*) (severe epilepsy) group are children who are under regular supervision at hospital and at school and whose condition is normally well controlled by sedation.

The 6 (*b*) (severe epilepsy) pupil in attendance at a special school is on the roll at Mid Calder Occupational Centre. The condition of this child has lately given cause for concern and she is at present under specialist supervision.

The number of defective children not in attendance at school or in institution can be classified as follows:—

Decision deferred—admission to school postponed	9
Awaiting admission to Occupational Centre	1
Suitable for Occupational Centre—parents arranging private tuition	3
Reported under Section 56 of the Education (Scotland) Act, 1946, as being mentally defective (ineducable and untrainable) (5 of these children are on the waiting list for admission to an institution)	9
Reported under Section 65 of the Education (Scotland) Act, 1963 as suffering from a disability of mind as to be unsuitable for education or training in a special school	2
Not yet reported under Section 65, but considered as mentally defective	1
Low-grade spastic discharged from Stanmore House as unsuitable case. Attends play centre in Edinburgh twice weekly	1
Injuries following car accident—severe cerebral damage—unable at present to benefit from tuition of any kind	1
	<hr/> 27

These children are kept under observation by Health Visitors, and are visited during the school holidays by Medical Officers who may make recommendations regarding general health and supervision. During the session 108 visits were made by Medical Officers.

MEDICAL TREATMENT

A. Minor Ailments.—Particulars of the cases attending with minor ailments are given in Table IX. Arrangements exist whereby children with ringworm of the scalp receive X-ray treatment at the Royal Infirmary, Edinburgh. During the year there was no such case reported.

B. Defective Vision and Squint.—Details of the treatment of defective vision cases are given in Table XI. Occlusion is the chief method used for the treatment of squint, and 18 cases were so dealt with during the year, under the supervision of the Ophthalmologist and Health Visitors.

In addition the Schools Ophthalmologist, in his capacity as Ophthalmic Surgeon of the Regional Hospital Board, referred 13 children to hospital for further examination and treatment where necessary. The defects from which these children suffered were as follows:—

Left congenital lens opacity	1
Left congenital with cataractus lens	1
Bilateral congenital abductor paralysis	1
Hereditary optic atrophy	1
Partial albino with slight nystagmus	1
Congenital nystagmus	2
Strabismus—right eye	3
Alternating strabismus	2
Congenital choroiditis	1
	—
	13
	—

General Practitioners are notified in all cases where children are referred to hospital.

C. Nose and Throat (Operative Treatment).—No special arrangements exist meantime for this.

D. Orthopaedic and Postural Defects (Specialist Treatment).—Children requiring operative treatment are admitted to Princess Margaret Rose Hospital. During 1962-63, there were 90 admissions (66 children admitted for the first time, and 24 readmissions).

Included in this number was 1 from St Joseph's Institution, Rosewell.

Apart from these hospital cases, during the year 453 new cases (171 pre-school and 282 school) were seen by the surgeon and 1,150 old cases (186 pre-school and 964 school) were re-examined. Pre-school children were given 1,198 treatments or advice while the school children made 11,057 visits. In addition Physiotherapists made 398 domiciliary visits to discuss cases with parents, etc. At the end of the year there were 337 pre-school and 1,382 school children on the register. Details are given in Tables XIII-XVI.

E. **“Follow-up” Home Visitation.**—“Follow-up” visits made by Health Visitors and Cleanliness Inspectresses to homes of children referred from school medical and cleanliness inspections, etc., were as follows:—

First visits	.	.	.	.	.	.	892
Re-visits	.	.	.	.	.	.	392
							<hr/>
Total visits	.						1284
							<hr/>

DENTAL INSPECTION AND TREATMENT

Report by the Senior Dental Officer

Altogether 9,423 children were presented for inspection; 7,813 (82.9%) showed some form of dental defect, 7,418 (94.94%) were offered treatment of whom 5,853 (78.9%) accepted and 5,842 (78.75%) were treated and made 24,525 attendances at the various clinics. By the end of the school year 77.8% of the cases treated had been made dentally fit.

These figures do not include orthodontic cases which are classified separately in Table XX of the Appendix.

It should be noted that for convenience in recording, the number of children counted as acceptances has been deliberately restricted only to those who received their first treatment visit prior to 31st-July, 1963. All other cases already inspected, but still remaining untreated, will not be recorded as acceptances until they receive their first treatment visit in the new school year.

The acceptance of treatment rate has been estimated also for reasons of accuracy from the list of schools where treatment has actually been completed during the year under review following systematic dental inspection. It shows a very slight decline (0.3%) and now stands at 69.5%. It should be noted however that this 69.5% acceptance is purely a primary rate and no follow-up effort has been attempted to boost it on account of the difficulty in coping with the work in hand.

Undoubtedly the main factor contributing to this altogether too low rate of acceptance is the unduly prolonged period between two consecutive treatment visits to any one school, but the time-lag between these visits has fortunately been decreased by 6.2 months since last year and now stands at 24.5 months.

Details of the current year's work are set out in Tables XVII to XX.

By comparison with last year there was an increase in the number of acceptances amounting to 297, in first visits for treatment of 307 (this figure is inclusive of patients whose treatment will not be completed until after the summer holidays), and of attendances for treatment 1247.

One hundred and seven fewer sessions were devoted to inspection and treatment by the dental officers but this was counter-balanced by the inclusion of 334 sessions worked by the Auxiliary.

The total output of work for the year shows very slight variation from that of the previous year apart from a slight drop in the number of temporary teeth filled.

This is clearly demonstrated in the undernoted Table which gives a comparative analysis of the output figures for the past two years.

Average Number of:—	1961-62	1962-63
First Visits per session . . .	1·61	1·75
Attendances per session . . .	6·78	6·7
Fillings per session . . .	5·1	4·71
Extractions per session . . .	2·45	2·1
Other operations per session . . .	3·9	3·42
Attendances per child treated . . .	4·2	4·2
Fillings per child treated . . .	3·17	2·97
Extractions per child treated . . .	1·52	1·32
Other Operations per child treated . . .	2·47	2·15

SPECIAL SCHOOLS AND CLASSES

The average numbers on the roll of special schools and classes during the session were as follows:—

Cockpen Occupational Centre	29
Mid Calder Occupational Centre	13
Kippielaw School	70
Special Class—Mid Calder School	16
Special Classes—Roslin School	54

In addition 2 Midlothian children attended the special class at Galashiels, 3 attended St Nicholas Special School, Edinburgh, 1 attended Willowbrae House, Edinburgh, and 1 West Park School, Gorgie, Edinburgh.

Where there are no facilities within the County, handicapped children may be admitted to Special Residential Schools outwith the County as places become available. At the end of the session 67 handicapped children were attending or resident at the following:—

Royal Blind School, Edinburgh	7
Special School for Partially Sighted Children, Edinburgh	4
Exhall Grange, Warwickshire (residential school for partially sighted children)	1
Donaldson's School for the Deaf, Edinburgh	8
St Giles School for Hard of Hearing Children, Edinburgh	15
Challenger Lodge, Edinburgh (physically handicapped children)	5
Coltness House, Wishaw (physically handicapped children)	1
Castle Craig, Peebleshire (physically handicapped children)	8
Westerlea School for Spastics, Edinburgh	5
Stanmore House, Lanark (Spastics)	2
Lendreich Muir School, Perthshire (maladjusted children)	4
Rudolf Steiner School, Aberdeen (maladjusted children) .	2
Harmony House, Balerno (maladjusted children)	2
Dr Barnardo's, East Lothian (maladjusted children)	2
Dr Barnardo's, Peebles (maladjusted children)	1

67

Seven children (including 5 pre-school children) suffering from varying degrees of spastic paralysis attend a play centre at Longstone organised by the Edinburgh and District Spastic Association.

ARRANGEMENTS FOR PHYSICAL EDUCATION AND PERSONAL HYGIENE

Swimming Instruction

The Education Committee have continued to give all Primary VI pupils the opportunity of learning to swim and all Secondary II pupils the opportunity of learning life-saving. A scheme during school hours was conducted for pupils attending schools in the Dalkeith-Lasswade, Gorebridge-Musselburgh areas, and a holiday scheme was conducted in July for pupils attending other schools in the county. 2,237 pupils took part in the two schemes: 1,163 Primary VI pupils were taught to swim and 608 Secondary pupils gained awards of the Royal Life Saving Society.

2180 examinations were carried out on children taking part in swimming instruction. 113 children suffered from the under-noted defects, 36 being excluded from attendance. Children suffering from conditions of uncleanness or minor skin infections were allowed to attend after satisfactory treatment had been carried out:—

Epilepsy	5
Blepharitis	2
Warts	35
Plantar Warts	6
Asthma	1
Septic sores	10
Skin conditions—body	8
Otorrhoea	11
Other ear conditions	1
Cardiac defect	1
Nits	15
Other defects	14
Unsatisfactory personal hygiene	4

113

Hostel Treks

In July 1963, the Education Committee provided for nearly 400 pupils, in groups of 20 approximately, taking part in hostel treks during the holidays. Four groups trekked in the Trossachs, four in Arran, four in the Grampian area and eight in the Lake District.

All the children taking part were given a medical inspection—approximately ten days before each trek camp was due to begin and a final inspection of defective cases, absentees, etc., was made on the morning of departure of each party. A circular letter was sent to all parents of children taking part in the trek camps stressing the need for a high standard of cleanliness. At the inspection the cleanliness and general fitness in this group of children was excellent. At the first inspection only 5 girls were reported as having “nits”, and at the final inspection these cases were fit to attend.

HEALTH EDUCATION

In all 428 talks were given in 23 schools—11 secondary schools, and 12 primary schools. Of these talks—12 were given by dental staff, 185 by nursing staff and 231 by medical staff. Details are given in Tables XXII and XXIII.

SCHOOL MEALS AND MILK SCHEME

School Meals.—School meals are supplied from three central kitchens in the County and from nineteen school kitchens.

Mid-day meals are available at 66 schools in the County.

The average number of children who took meals daily was as follows:—

Free	.	.	.	.	1072
On payment	.	.	.	.	5790
					<hr/>
Total	.				6862
					<hr/>

The number taking meals in June 1963 was 33·6% of roll.

Milk in Schools Scheme.—Milk of “T.T.” or pasteurised quality was available at all our schools during this session.

The average daily number of children who had milk at school during the session was 18,086. This represents approximately 88·4 % of the total school roll.

Special arrangements have been made whereby children of school age unable to attend school, and children absent due to illness can have milk (on recommendation of Medical Officer) at home. During the year 24 such recommendations were made.

HANDICAPPED CHILDREN LEAVING SCHOOL

The Midlothian and Peeblesshire Youth Committee are advised of any physically or mentally handicapped children leaving school whose suitability for employment is limited. In the course of the year 44 Midlothian children were so reported.

IMMUNISATION AND VACCINATION

During the year 1,519 children of school age were given "booster" injections against diphtheria. The number of children admitted to school for the first time and who had already been given "booster" injections was 1,446 or 70% of all new entrants. A special check made on all school medical records at the end of June showed that only 458 cards (approx. 2.5%) bore no record of children being immunised against diphtheria.

Poliomyelitis vaccinations continued to be offered to all children over 6 months of age including the administration of a fourth injection to all children entering school at the age of five years and to those over that age in primary schools. During the year 2,505 children from 6 months of age to 16 years of age were given primary vaccination, 2,953 were given a third injection, and 2,586 were given a fourth injection. A special check made on all school medical records as above showed that 1,010 children, approximately 5% of the school population of 20,253 were not vaccinated against poliomyelitis.

A special check was also made in regard to smallpox vaccination. 4,120 children, or 20% of the school population were found to be not vaccinated.

PEEBLESHIRE GENERAL STATISTICS

Number of schools—

(a) Primary	} under Education Authority	| . . .	12
(b) Secondary			4
(c) (1) Special schools			—
(2) Special classes in ordinary schools			1
(3) Residential schools			1
(d) In receipt of grant from Education Authority and under medical inspection			—
Number of children on the registers			2008
Number of children in average attendance			1848

SANITARY CONDITIONS OF SCHOOLS

I am indebted to the Director of Education for the following information:

Peebles High School

The additional classroom accommodation and alterations commenced in May 1963.

Walkerburn Primary School

The Dining Hut has been completed and has been in occupation since Easter 1963.

THE FINDINGS OF MEDICAL INSPECTION

Number Examined.—In accordance with D.H.S. Circular 58/1962 the following groups of children underwent systematic inspection:—

- (1) Entrants (children entering school for the first time).
- (2) Pupils born in 1955 (Visual Acuity and Hearing only).
- (3) Pupils born in 1953.
- (4) Pupils born in 1949.
- (5) Pupils born in 1946.
- (6) Other systematic examinations—pupils not previously subjected to detailed routine inspection, as well as those who, because of absence or for any other reason, were missed in the age group the previous year.
- (7) Special examinations—pupils examined at the request of parents, teachers or health visitors.
- (8) Re-examinations—pupils found at previous inspections to be suffering from disease or defect and recommended by Medical Officers for re-examination.

In addition examinations were carried out on children requiring transport, etc. Altogether 1,319 examinations were made by Medical Officers during the year, full details being given in Table IA.

Parents Present.—The number of parents present at routine examinations was 220 for 737 children of all ages or 29·85%. The following figures show the number of children in the different age groups who were accompanied by their parents:—

	Examined	Parents Present	%
Age 5	243	147	60·49
Age 9	239	65	27·19
Age 13	211	8	3·79
Age 16	44	—	—
	<hr/> 737	<hr/> 220	<hr/> 29·85

Clothing and Footgear.—No case of unsatisfactory clothing or of unsatisfactory footgear was found at routine inspection.

Smallpox Vaccination.—86·29% of the children examined at routine inspection were found to be vaccinated.

Uncleanliness.—The position with regard to uncleanliness is given in Tables IIIA, VIIA and VIIIA. The degree of infestation is still small. All the cases reported were followed up and Table VIIIA shows that at the end of the school session all the cases reported had either been cleansed or were under treatment.

Skin Conditions.—11 children (1·48%) were found at routine inspection to suffer from skin conditions.

Nutrition.—0·41% of children at routine inspection were found to be slightly undernourished.

The average heights and weights of children examined in routine inspections are given in Table IIA. There is little variation from the 1939 averages.

Mouth, Nose, Throat and Glands.—The total number of cases with defects was small (21 or 2·85%). 75% of these defects occurred in the 5-year-old group of children.

Vision.—19 children were found at routine inspection to have defective vision requiring treatment. 131 children were seen at Eye Clinics during the year details being given in Table XI_A. Of the children examined 36 were being seen for the first time and 95 were children being called for routine re-examination, etc. Of the 243 5-year-old children tested, 4 were referred to the oculist and 1 had glasses prescribed.

External Eye Disease.—Cases of external eye disease were few, though 7 or 0.95% of the “routine” children were found to have a squint.

Ears and Hearing.—Hearing tests at routine medical inspections, necessarily inaccurate because of lack of accurate means of testing, showed 8 cases to suffer from some degree of loss of hearing.

In the routine audiometric tests the groups tested were those children born in 1957 (5-year-old group), 1955 (7-year-old group) and 1951 (11-year-old age group). In addition there were also tested special cases referred from medical inspections and other sources, and retests were carried out on children reported as defective from last audiometric tests. Any 1957, 1955, 1951 age group children were included with their respective age groups and not included in the “retest” group. Altogether 648 children were tested and details are given in Table XII_A.

Speech.—Speech defects were found in 6 children at routine examinations, representing 0.81%.

The Speech Therapist reports as follows:—

Number of cases carried forward from Session	
1961-62	55
New cases admitted Session 1962-63	102
Cases discharged 1962-63	70
Cases on Treatment Register end of Session 1963	87

Of the 87 children on the register at the end of the Session 74 suffered from defects of articulation and 13 from stammering.

Mental and Nervous Conditions.—7 children (0.96%) were noted at routine inspection to be mentally backward or to suffer from behaviour difficulties.

During the year 14 children in this group were examined specially by the School Medical Officer. Recommendations were made as follows:—

Education in ordinary school as educationally sub-normal pupil	2
Special school	3
Remain in special school	7
(Routine re-assessments of children at St Ronan's Special School.)	
No report necessary under Section 66, Educ. (Scot.) Act, 1962	2
	<hr/> 14

Two cases (Behaviour difficulties (1), Refusal to attend school (1)) were referred to the Psychiatrist, Department of Psychological Medicine, Royal Hospital for Sick Children. These cases are still continuing. The Psychiatrist reports that there are 17 Peeblesshire children under supervision at Hospital.

Heart Disease.—7 children (0·94%) examined at routine inspection suffered from some heart condition, but no severe disability was evident.

Lungs.—2 children (0·27%) examined at routine inspection were found to have some abnormality of the lungs.

No skin testing was given to children in Peeblesshire, as there were no known contacts.

The skin testing and giving of B.C.G. to all 13-year-old school children was continued this year. No cases were discovered.

Fuller details of the skin testing, etc. are given in Table XXIIA.

Deformities.—75 cases (10·17%) of fairly marked physical deformity were found at routine inspection.

General Statement of Defects.—Table IVA gives a summary of the position of the routine inspection cases classified according to the degree or type of defect. 69·9% of those examined were free from all defects. Table VA gives the total numbers of exceptional children in the area. There are 4 children of school age who are not yet in attendance at school. These cases are kept under regular supervision by Medical and Health Visiting staff.

MEDICAL TREATMENT

A. Minor Ailments.—Particulars of the cases attending with minor ailments are given in Table IXA. Treatment of Minor Ailments takes place in all schools in the County.

B. Defective Vision and Squint.—Details of the action taken in defective vision cases are given in Table XIA. Occlusion is the chief method used for the treatment of squint and 2 cases were so dealt with during the year.

C. Nose and Throat (Operative Treatment).—Children suffering from enlarged tonsils and adenoids are treated at Cottage Hospitals under arrangements made with the Border Hospitals Board of Management.

D. Orthopaedic and Postural Defects (Specialist Treatment).—Children requiring operative treatment are at present admitted to Peel Hospital, Galashiels, or Princess Margaret Rose Hospital, Edinburgh. During the year to 31st July 1963, 16 children were admitted to Peel Hospital and 4 children were admitted to Princess Margaret Rose Hospital. In addition 49 children attended Peel Hospital as out-patients.

Apart from these hospital cases, 5 new pre-school and 42 new school cases were seen by the surgeon and 24 pre-school and 254 school children previously seen were re-examined. Pre-school children made 27 visits for treatment or advice while school children attended on 1,377 occasions. In addition the Physio-therapist made 55 domiciliary visits. At the end of the year there were 12 pre-school and 166 school children on the register. Details are given in Tables XIII A-XVI A.

E. "Follow-up" Home Visitation.—"Follow-up" visits made by Health Visitors to homes of children referred from school medical and cleanliness inspections, etc., were as follows:—

First visits	.	.	.	.	38
Re-visits	.	.	.	.	16

Total visits . 54

DENTAL INSPECTION AND TREATMENT

The system adopted during the past two years, of utilising the services of some of the Midlothian dental officers during holiday periods exclusive to Midlothian proved so satisfactory that it was extended to include both Easter and Summer Vacations. By this method it has been possible to examine and provide treatment for a greater number of children within a twelve month period.

Altogether 1,663 school children were examined during the year. 1,437 (86.41%) showed some form of dental defect. 1,370 (95.3% of the defective cases) were offered treatment. 1,188 (86.7% of those offered treatment) accepted treatment and all but one received it. These 1,187 children made 4,576 attendances at the clinics for dental treatment. These figures do not include orthodontic cases which are classified separately in Table XXA of Appendix. 67 children with defects were not offered treatment either because they were already under the care of private practitioners or their dental defects were so trivial that treatment was considered unnecessary.

The number of acceptances recorded refers only to those children who received their first treatment visit during the school year under review.

The acceptance rate, recorded for accuracy only from the list of schools actually completed during the year (see Table XIXA) is 84.6% and shows a slight increase amounting to 2%. It should be emphasised that this is entirely a primary acceptance rate quite unstimulated by any follow-up effort.

The average gap between two consecutive school visits has shown a further slight reduction amounting to 1.7 and now stands at 21.6 months.

Details of the year's work appear in Tables XVIIA-XXIA.

By comparison with last year there was an increase of 644 in the number of children inspected of 600 in the number offered treatment and 481 in the number actually treated.

Sessions devoted to inspection and treatment were increased by 21 thus resulting in an increase in output.

A comparative analysis covering the past three years is tabulated hereunder and is rather interesting in that the previous two years showed a remarkable similarity whereas 1962-63 shows

a definite change of pattern with a greater number of first visits, attendances, fillings and other operations per session but a decrease in the number of attendances, fillings and extractions per child treated.

Average Number of—	1960-61	1961-62	1962-63
First Visits per session . . .	1.59	1.38	2.25
Attendances per session . . .	5.86	5.65	8.7
Fillings per session . . .	4.76	4.76	5.82
Extractions per session . . .	1.8	1.38	1.65
Other operations per session . .	2.57	2.09	4.08
Attendances per Child treated .	3.66	4.07	3.85
Fillings per Child treated . . .	2.98	3.43	2.58
Extractions per Child treated . .	1.13	1.00	0.73
Other operations per child treated	1.61	1.51	1.8

It will be noted in Table XIXA that with the exception of Eddleston and Skirling all the small rural schools have been re-inspected and treated within a period of twelve months. This is no doubt the main reason for the reduction in the amount of treatment per child treated but it must be associated with the fact that Kingsland, Walkerburn and West Linton Schools have been inspected also, and treatment commenced, thus resulting in a greater number of first visits per session. It must, however, be borne in mind that the majority of these cases will not be completed until the new school year.

DENTAL HEALTH EDUCATION CAMPAIGN—1962

Measurement of Results

Prior to the opening of this campaign in January 1962, a survey was made of the dentitions of 1,551 Peeblesshire school children all between the ages of 5 and 15 years. Special record forms were prepared for the purpose and complete details of the condition of each surface of every tooth present, the state of dental hygiene, and the condition of the gums, recorded. At the same time each child was given a questionnaire and covering letter inviting their parents to co-operate by answering the questions all of which dealt with brushing and eating habits. On receipt of the answers appropriate entries were recorded on the forms which were subsequently coded and forwarded to the Central Department for detailed assessment and analysis.

In June 1962, some three months after the conclusion of the campaign approximately half of the children previously surveyed were re-examined and the state of their teeth recorded in regard to hygiene, staining and condition of surrounding soft tissues. Questionnaires were again sent home and the replies duly recorded on the Survey Charts which, after coding were forwarded to the Central Department for assessment.

In October approximately seven months after conclusion of the campaign the remainder of the children included in the pre-campaign survey, were re-examined and respective dental conditions recorded in precisely similar manner to those re-examined in June, Survey Forms were completed, coded and submitted to the Central Department. Thus all the children included in the pre-campaign survey were broken up into two groups, the first being re-examined in June 1962 and the second group in October 1962 in an effort to evaluate the effect of the campaign after a lapse of approximately 3 months in the case of the first group and seven months for the second group.

The result of the Oral Hygiene Examination is tabulated hereunder:—

	Pre-campaign (November and December 1961)		Post-campaign 1st Group (June 1962)		Post-campaign 2nd Group (October 1962)	
Number of Children Examined	1551		779	50.2%	694	44.7%
Oral Hygiene Standard (1) Good	93	6%	182	23%	262	38%
(2) Fair	628	40%	482	62%	325	47%
(3) Bad	830	54%	115	15%	107	15%

A great deal of time was devoted to this examination which was carried out with great care under uniform conditions utilising a Terry Angle-poise Light fitted with a 60-Watt lamp for illumination, sharp probes and new mouth mirrors.

All schools in the County were included with the exception of Castleeraig and Leithenside.

The standard of examination was uncompromising and only 93 Children (6%) were classified as having a Good standard of Hygiene in the pre-campaign survey, and they were indeed perfect! A considerable number of children with otherwise well cared for mouths were degraded to "Fair" simply because of the presence even of a small amount of food debris on any tooth surface. In some instances these children would have been labelled "Good" if they had been examined before the "mid-morning interval". It will be noted that in 54% of cases hygiene was "Bad".

At the first post-campaign examination (June 1962) the "Good Hygienes" had risen to 23% and the "Bads" had fallen to 15%.

It is quite remarkable that the result of the second group post-campaign examination (October 1962) revealed that 38% of the children were classified as "Good" despite the intervention of the School Holidays when entirely uninfluenced by their teachers. The number of "Fairs" showed a corresponding drop and the "Bads" still remained at 15%. Thus both groups would appear to have a hard core of 15% of children who did not respond to the stimulus of a Dental Health Education Campaign.

It is felt that the Campaign effort was well worthwhile and a great deal of the credit is undoubtedly due to the teachers to whom we are all indebted, and if this subject can be kept alive and dental hygiene vigorously practised it will in course of time reduce the enormous amount of dental disease and so enable the profession to cope more adequately with this problem.

The tabulated replies to the parental Questionnaire, after careful analysis, were considered to be unreliable from a statistical point of view, as it was stated that some of the questions were ambiguously phrased. It was also recognised that a number of parents minimised the quantity of sweets consumed.

The final result of teeth already Decayed Missing or Filled—the D.M.F. Rate—is still awaited from the Central Department where, owing to high pressure of work, there has been an unavoidable delay in providing separate tables for the participating authorities.

SPECIAL SCHOOLS AND CLASSES

At the end of the year there were 16 pupils in attendance at St Ronans Special School.

Handicapped children may be admitted to special schools as resident pupils, etc. At the end of the year 9 handicapped children were attending or resident as follows:—

Castlecraig Residential School	3
Blind School, Worcester	1
St Giles School, Edinburgh (hard of hearing children) .	1
Garvald House, Dolphinton (mentally handicapped) .	3
Trefoil School, Midlothian (physically handicapped) .	1
	9
	—

CASTLECRAIG RESIDENTIAL SCHOOL

Peeblesshire Children

	Boys	Girls	Total
In attendance at beginning of Session 1962-63 (Including 1 boy resident only and attending West Linton Secondary School)	4	—	4
Recommended for discharge at end of Session	1	—	1
	—	—	—
Recommended for re-admission at beginning of Session 1963-64	3	—	3
	—	—	—

The defects from which the 3 boys recommended for re-admission suffer are as follows:—

Albinism	2
*Unsatisfactory Home	1
(*Resident only)	

General	Boys	Girls	Total
In attendance at beginning of Session			
1962-63	*20	9	29
(*1 boy resident only)			
Admitted at beginning of Session and at various times throughout the year .	8	4	12
	—	—	—
	28	13	41
Left on account of age during Session .	—	1	1
	—	—	—
	28	12	40
Recommended for discharge at end of Session 1962-63	10	4	14
	—	—	—
Recommended for re-admission at beginning of Session 1963-64	*18	8	26
(*1 boy resident only)	—	—	—
Vacancies available at beginning of Session 1963-64	10	4	14

1. *Children in attendance during the session came from the following areas:—*

	Boys	Girls	Totals
Peeblesshire	4	—	4
Midlothian	3	5	8
Lanarkshire	14	5	19
Roxburghshire	1	1	2
Selkirkshire	1	—	1
Edinburgh	3	2	5
Kirkcudbright	1	—	1
West Lothian	1	—	1
	—	—	—
	28	13	41
	—	—	—

2. *Children in attendance suffered from the following defects:—*

	Boys	Girls	Totals
General Orthopaedic defects	2	—	2
Asthma	17	8	25
Chronic Bronchitis	1	—	1
Organic Heart defect	—	1	1
Psychological Maladjustment	—	2	2
Obesity and bad home care	—	1	1
Pseudo Muscular Dystrophy	1	—	1
Urinary Defect	1	—	1
Albino	3	—	3
Unsatisfactory home	1	—	1
Eczema	1	—	1
Enlarged liver	1	—	1
Ataxia	—	1	1
	—	—	—
	28	13	41
	—	—	—

3. *Children discharged or withdrawn throughout the session:—*

	Girls
Midlothian	1
	—

4. *Children recommended on 31st July 1963 for return to ordinary schools:—*

	Boys	Girls
Midlothian	2	1
Lanarkshire	6	3
Peeblesshire	1	—
Roxburghshire	1	—
	10	4

5. *Children on waiting list on 31st July 1963:—*

	Boys	Girls
Lanarkshire	2	2
	—	—

ARRANGEMENTS FOR PHYSICAL EDUCATION AND PERSONAL HYGIENE

School Camp

Peeblesshire children did not participate in any school camps this year.

SCHOOL MEALS AND MILK SCHEME

School Meals are supplied from 5 central kitchens—Peebles High, Broughton, West Linton Central, St Ronans Secondary and Manor Schools.

The average number of children who took meals daily was as follows:—

Free	76
On payment	725
On remission of part of charge	22
	<hr/>
	823
	<hr/>

The number taking meals in June 1963 was 40·9% of the roll.

The above figures do not include children at Castlecraig.

All schools were supplied with pasteurised milk.

The average daily number of children supplied with milk is 1,540 or 76·6% of the total roll.

In addition children at Castlecraig, Craigerne Special School, Garvald House, and Broomlee Camp, are supplied with milk under the scheme.

HEALTH EDUCATION

In all 48 talks were given in four secondary schools and one primary school—23 by nursing and 25 by medical staff. Details are given in Table XXIII A.

HANDICAPPED CHILDREN LEAVING SCHOOL

The Midlothian and Peeblesshire Youth Committee are advised of any physically or mentally handicapped children leaving school whose suitability for employment is limited. In the course of the year 6 Peeblesshire children were so reported.

IMMUNISATION AND VACCINATION

During the year 146 children were given "booster" injections against diphtheria. The number of children admitted to school for the first time and who had already been given "booster" injections was 105 or 70% of all new entrants. A special check made on all school medical records at the end of June showed that only 67 cards (approx. 3%) bore no record of children being immunised against diphtheria.

Poliomyelitis vaccinations continued to be offered to all children over 6 months of age including the administration of a fourth injection to all children entering school at the age of five years and to those over that age in primary schools. During the year 153 children from 6 months of age to 16 years of age were given primary vaccinations (*i.e.*, two injections), 223 were given a third injection, and 230 were given a fourth injection. A special check made on all school medical records as above showed that 120 children, approximately 6% of the school population of 2,008 were not vaccinated against poliomyelitis.

A special check was also made in regard to smallpox vaccination. 204 children or 10% of the school population were found to be not vaccinated.

APPENDIX

MIDLOTHIAN

TABLE I

Number of children examined at:—

(a) Systematic Examinations	Routine Examinations	Other Systematic Examinations	Total
V. Year Age Group (Born 1957)	1998	382	2380
IX. Year Age Group (Born 1953)	1758	242	2000
XIII. Year Age Group (Born 1949)	1658	143	1801
XVI. Year Age Group (Born 1946)	194	24	218
	<hr/> 5608	<hr/> 791	<hr/> 6399
(b) Other Examinations			
VII. Year Group—Vision only (Born 1955)			1898
Special Cases			3086
Re-inspections by Medical Officers			1435
“Leavers”—Vocational Guidance Examinations			1305
Audiometric Testing—medical follow up			520
Children attending Speech Therapist			4
Examinations under Section 63 of Education (Scotland) Act, 1962			131
Pre-apprenticeship and Pre-nursing Courses			70
Employment of School Children (Children and Young Persons (Scotland) Act, 1937)			163
Juvenile Offenders (Children and Young Persons (Scotland) Act, 1937)			28
Children attending School Camps			956
Children attending Swimming Instruction			2180
Other Examinations (Transport, Transfers, Irregular Attendance, etc.)			91
			<hr/> 11.867
(c) Notices to Parents of Children examined at Routine Inspections			
Entrants			215
9 years			112
13 years			134
16 years			16
			<hr/> 477
(d) Notices to Parents of Children examined as Specials			327
			<hr/> Total 804

TABLE II

HEIGHTS AND WEIGHTS (ROUTINE EXAMINATIONS)

	Average Age		Numbers	Average Height (ins.)	Average Weight (lbs.)
	Yrs.	Mos.			
BOYS	5	8	1041	44.2	44.6
	9	7	900	52.9	66.7
	13	8	835	61.2	100.9
	16	8	100	68.3	137.5
GIRLS	5	8	957	43.8	43.2
	9	7	858	52.1	65.5
	13	8	823	61.2	106.9
	16	8	94	63.1	125.6

TABLE III—SYSTEMATIC EXAMINATIONS

	ENTRANTS				IX YEAR				XIII YEAR				XVI YEAR				ALL AGES				TOTALS	
	Boys		Girls		Boys		Girls		Boys		Girls		Boys		Girls		Boys		Girls		No.	%
No. Examined	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
Parents Present	1227	71.1	768	66.6	1035	42.5	965	47.6	910	5.1	891	5.4	110	0.9	108	1.8	3282	41.4	3117	41.0	6399	41.22
Clothing Unsatisfactory	872	—	1	0.1	440	2.0	460	2.0	47	—	48	0.1	1	—	2	—	1360	2.06	1278	4.13	2638	6.09
Footgear Unsatisfactory	—	—	1	0.1	1	0.1	—	—	—	—	—	—	—	—	—	—	1	0.03	1	0.03	2	0.03
Vaccinated	1017	82.8	977	84.7	796	76.9	733	75.9	673	73.9	658	73.8	96	87.3	99	91.7	2582	78.7	2467	79.1	5049	78.90
Uncleanliness—Head	3	0.2	14	1.2	4	0.4	10	1.0	3	0.3	5	0.6	—	—	—	—	10	0.3	29	0.9	39	0.61
Body	4	0.3	1	0.1	1	0.1	—	—	3	0.3	2	0.2	—	—	—	—	8	0.24	3	0.09	11	0.17
Both	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Skin—Head—Ringworm	1	0.1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	0.03	—	—	1	0.02
Impetigo	4	0.3	—	—	1	0.1	—	—	1	0.1	—	—	—	—	—	—	6	0.18	—	—	6	0.09
Other Diseases	13	1.1	11	0.9	5	0.5	5	0.5	6	0.7	6	0.7	2	1.8	—	—	26	0.8	22	0.7	48	0.75
Body—Ringworm	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Impetigo	1	0.1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	0.03	—	—	1	0.02
Scabies	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Diseases	20	1.6	20	1.7	18	1.7	20	2.1	10	1.1	14	1.6	2	1.8	2	1.8	50	1.5	56	1.8	106	1.66
Nutrition—Sl. Defect	16	1.3	14	1.2	6	0.6	3	0.3	16	1.8	8	0.9	—	—	—	—	38	1.1	25	0.8	63	0.98
Bad	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Oral Sepsis	28	2.3	27	2.3	9	0.9	14	1.5	8	0.9	8	0.9	1	0.9	1	0.9	46	1.3	50	1.6	96	1.50
Nose—Obst. req. observ.	73	5.9	56	4.9	18	1.7	11	1.1	7	0.8	7	0.8	—	—	—	—	98	2.9	74	2.4	172	2.69
Obst. req. oper.	20	1.6	17	1.5	6	0.6	4	0.4	—	—	—	—	—	—	—	—	26	0.8	21	0.7	47	0.73
Other conditions	4	0.3	3	0.3	1	0.1	2	0.2	5	0.5	—	—	1	0.9	—	—	11	0.3	5	0.16	16	0.25
Throat—Tons. req. observ.	130	10.6	146	12.6	25	2.4	25	2.6	13	1.4	10	1.1	—	—	—	—	168	5.1	181	5.8	349	5.45
Tons. req. oper.	35	2.8	33	2.9	7	0.7	8	0.8	1	0.1	2	0.2	—	—	—	—	43	1.3	43	1.4	86	1.34
Glands—req. observ.	125	10.2	127	11.0	14	1.4	16	1.7	4	0.4	2	0.2	—	—	—	—	143	4.4	145	4.6	288	4.50
req. oper.	8	0.7	2	0.2	1	0.1	1	0.1	—	—	—	—	—	—	—	—	9	0.27	3	0.09	12	0.19
Vision—Fair.	286	23.3	276	—	183	17.7	188	19.5	160	17.5	172	19.3	27	24.5	30	27.8	656	20.0	666	21.4	1322	20.66
Bad.	13	1.1	11	0.9	19	1.8	11	1.1	25	2.7	17	1.9	3	2.7	4	3.7	60	1.8	43	1.4	103	1.61
Req. refraction	61	4.9	35	3.0	38	3.7	30	3.1	44	4.8	46	5.2	4	3.6	6	5.6	147	4.5	117	3.8	264	4.13
External Eye Disease—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Bleph.	6	0.5	6	0.5	1	0.1	4	0.4	5	0.5	1	0.1	—	—	—	—	12	0.4	11	0.4	23	0.36
Conjunc.	1	0.1	—	—	—	—	—	—	1	0.1	—	—	—	—	—	—	2	0.06	—	—	2	0.03
Corn. Opac.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Strab.	54	4.4	27	2.3	11	1.1	17	1.8	8	0.9	6	0.7	1	0.9	1	0.9	74	2.3	51	1.6	125	1.95
Other Diseases	5	0.4	3	0.3	5	0.5	1	0.1	4	0.4	—	—	—	—	—	—	14	0.4	4	0.13	18	0.28
Ears—Otorrhoea	5	0.4	5	0.4	3	0.3	2	0.2	1	0.1	1	0.1	—	—	—	—	9	0.27	8	0.26	17	0.27
Other Diseases	9	0.7	12	1.0	4	0.4	1	0.1	3	0.3	2	0.2	—	—	1	0.9	16	0.5	16	0.5	32	0.50
Hearing—Grade I.	12	1.0	7	0.6	18	1.7	4	0.4	13	1.4	6	0.7	—	—	—	—	43	1.3	17	0.5	60	0.94
Grade IIa	5	0.4	3	0.3	13	1.3	9	0.9	13	1.4	11	1.2	—	—	—	—	31	0.9	23	0.7	54	0.84
Grade IIb	—	—	—	—	1	0.1	—	—	1	0.1	—	—	—	—	—	—	2	0.06	—	—	2	0.03
Grade III	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Speech—Def. Art.	38	3.1	15	1.3	8	0.8	2	0.2	7	0.8	4	0.4	—	—	—	—	53	1.6	21	0.7	74	1.16
Stammer.	2	0.2	—	—	2	0.2	2	0.2	4	0.4	—	—	—	—	—	—	8	0.24	2	0.06	10	0.15
Mental and Nerv. cond.—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Backward.	2	0.2	3	0.3	—	—	2	0.2	—	—	—	—	—	—	—	—	2	0.06	5	0.16	7	0.11
Dull.	10	0.8	7	0.6	9	0.9	3	0.3	4	0.4	4	0.4	—	—	—	—	23	0.7	14	0.4	37	0.58
Def. (Educ.)	3	0.2	2	0.2	2	0.2	2	0.2	5	0.5	2	0.2	—	—	—	—	10	0.3	6	0.19	16	0.25
Def. (Ined.)	1	0.1	1	0.1	4	0.4	1	0.1	3	0.3	4	0.4	—	—	—	—	8	0.24	6	0.19	14	0.22
Highly Nervous, etc.	24	1.9	16	1.4	19	1.8	12	1.2	6	0.7	2	0.2	—	—	—	—	49	1.5	30	1.0	79	1.23
Difficult in Behaviour.	14	1.1	2	0.2	2	0.2	—	—	—	—	—	—	—	—	—	—	16	0.5	2	0.06	18	0.28
Heart Disease—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Organic—Cong.	5	0.4	3	0.3	5	0.5	4	0.4	2	0.2	1	0.1	—	—	—	—	12	0.4	8	0.26	20	0.31
Acq.	1	0.1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	0.03	—	—	1	0.02
Functional	14	1.1	11	0.9	7	0.7	9	0.9	3	0.3	3	0.3	1	0.9	—	—	25	0.8	23	0.7	48	0.75
Lungs—Chr. Bron.	3	0.2	—	—	—	—	1	0.1	1	0.1	1	0.1	—	—	—	—	4	0.12	2	0.06	6	0.09
? Tuberculosis	1	0.1	—	—	—	—	—	—	—	—	—	—	—	—	—	—	1	0.03	—	—	1	0.02
Other Diseases	28	2.3	13	1.1	18	1.7	7	0.7	12	1.3	2	0.2	1	0.9	—	—	59	1.8	22	0.7	81	1.27
Deformities	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Congenital	34	2.8	32	2.8	16	1.5	12	1.2	6	0.7	7	0.8	—	—	—	—	56	1.7	51	1.6	107	1.67
Acquired (Infant)	1	0.1	—	—	—	—	1	0.1	—	—	4	0.4	—	—	1	0.9	1	0.03	6	0.19	7	0.11
Prob. Rickets	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Other Causes	135	11.0	81	7.0	58	5.6	69	7.1	49	5.4	61	6.8	2	1.8	3	2.8	244	7.4	214	6.9	458	7.16
Infectious Diseases	2	0.2	2	0.2	—	—	—	—	1	0.1	—	—	—	—	—	—	3	0.09	2	0.06	5	0.08
Other Conditions	65	5.3	57	4.9	55	5.3	39	4.0	38	4.2	40	4.5	1	0.9	4	3.7	159	4.8	140	4.5	299	4.77

TABLE IV
CLASSIFICATION OF SYSTEMATIC EXAMINATIONS

Group	ENTRANTS		2ND AGE GROUP		3RD AGE GROUP		SECONDARY AGE GROUP		TOTAL	
	No. of Children	% of Group	No. of Children	% of Group	No. of Children	% of Group	No. of Children	% of Group	No. of Children	% of All Children Examined
I	1210	50.8	1241	62.0	1128	62.6	144	66.1	3723	58.2
IIA	261	11.0	213	10.7	172	9.6	35	16.1	681	10.6
IB	24	1.0	10	0.5	4	0.2	1	0.5	39	0.6
IC	—	—	—	—	—	—	—	—	—	—
Total.	285	12.0	223	11.2	176	9.8	36	16.6	720	11.2
III	526	22.1	270	13.5	222	12.3	8	3.6	1026	16.0
IVA	210	8.9	128	6.4	113	6.3	7	3.2	458	7.2
VB	149	6.2	138	6.9	162	9.0	23	10.5	472	7.4
Total.	359	15.1	266	13.3	275	15.3	30	13.7	930	14.6
Grand Total	2380	100.0	2000	100.0	1801	100.0	218	100.0	6399	100.0

I.—Children free from defects.
 II.—Children (otherwise free from defects) who suffer from (a) Defective vision not worse than 6/12 in the better eye with or without glasses; (b) Conditions of the mouth and teeth likely to affect the general health; (c) Both (a) and (b).
 III.—Children suffering from ailments (other than those mentioned in II) from which complete recovery is anticipated within a few weeks.
 IV.—Children suffering from (or suspected to be suffering from) defects less remediable than defects specified in II or III, distinguishing cases—(a) Where complete cure or restoration of function (in the case of eye defect full correction) is considered possible; (b) Where improvement only is considered possible, *i.e.*, without complete restoration of function.

TABLE V

RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA

Disability	At Ordinary Schools	At Special Schools or Classes	At no School or Institution	Total
1. Blind	—	7	1	8
2. Partially sighted—				
(a) Refractive errors in which the curriculum of an ordinary school would adversely affect the eye condition	2	5	—	7
(b) Other conditions of the eye e.g., cataract, ulceration, etc., which render the child unable to read ordinary school books or to see well enough to be taught in an ordinary school	—	—	—	—
3. Deaf—Grade I	1124	12	—	1136
„ II	53	I	—	54
„ IIA	404	6	—	410
„ IIB	—	15	—	15
„ III	—	8	—	8
4. Defective Speech—				
(a) Defects of articulation requiring special educational measures	535	37	12	584
(b) Stammering requiring special educational measures	40	1	—	41
5. Mentally Defective (children between 5 and 16 years)—				
(a) Educable (I.Q. approx. 50-70)	30	128	4	162
(b) Ineducable (I.Q. generally less than 50)	—	41	24	65
6. Epilepsy—				
(a) Mild and occasional	43	3	1	47
(b) Severe (suitable for care in a residential school)	4	1	1	6
7. Physically Defective (children between 5 and 16 years)—				
(a) Non-pulmonary tuberculosis (excluding Cervical Glands)	7	1	—	8
(b) General orthopaedic conditions	2327	45	11	2383
(c) Organic Heart disease	133	4	—	137
(d) Other causes of ill-health	261	25	3	289
* 8. Multiple Defects	428	88	27	543
* (Included in above)				

(Included in "At Special Schools or Classes" are children at Special Schools outwith the County, p. 30. See also p. 24. "General Statement of Defects".)

Multiple Defects	Ordinary School	Special School	At Home	Total
1, 5 (b), 7 (b)	—	—	1	1
3, 5 (b)	—	1	—	1
3, 4 (a), 5 (b)	—	1	—	1
4 (a), 5 (a)	—	—	1	1
4 (a), 5 (b)	—	10	11	21
4 (a), 5 (b), 6 (a), 7 (b)	—	1	—	1
4 (a), 5 (b), 7 (b)	—	1	—	1
4 (a), 5 (b), 7 (c)	—	1	—	1
4 (b), 5 (b), 7 (a)	—	1	—	1
5 (a), 7 (d)	—	—	2	2
5 (b), 6 (a)	—	1	1	2
5 (b), 6 (a), 7 (b)	—	1	—	1
5 (b), 6 (a), 7 (b), 7 (c)	—	1	—	1
5 (b), 6 (b)	—	—	1	1
5 (b), 7 (b)	—	3	10	13
5 (b), 7 (b), 7 (c)	—	1	—	1
5 (b), 7 (c)	—	1	—	1
Others	428	64	—	492
	428	88	27	543

TABLE VI
AMELIORATION TABLE—PHYSICAL DEFECTS

DEFECTS	No. Reported	TREATMENT				Not yet Visited	Left School or District
		Completed	Proceeding	Promised	Refused		
Enlarged or Septic Tonsils	29	16	12	—	—	—	1
Adenoids	10	5	5	—	—	—	—
Otorrhoea	6	6	—	—	—	—	—
Skin Conditions	12	7	4	—	—	—	1
Various	66	37	28	1	—	—	—
Totals	123	71	49	1	—	—	2

TABLE VII
CLEANLINESS INSPECTIONS

	TERM		
	Autumn	Spring	Summer
Number Examined	19,000	17,274	16,000
Found to have Nits	232 (1·22%)	155 (0·89%)	129 (0·81%)
Found to have Head Vermin	11 (0·05%)	4 (0·02%)	6 (0·04%)
New Cases—Nits	—	82 (0·47%)	61 (0·38%)
New Cases—Head Vermin	—	4 (0·02%)	4 (0·02%)

TABLE VIII
AMELIORATION TABLE—UNCLEANLINESS

Number found with Vermin	Nits only	Cleansed	Improved	Not Improved	Not yet visited	Left School
22	380	345	34	5	1	17

TABLE 1X

MINOR AILMENTS

Number of Children attending		1196
Total Number of Attendances		2090
Classification of Ailments with Attendances:—	1st Visit	Re-Visit
(1) Cuts, Bruises, Sprains, Minor Injuries, etc.	794	412
(2) Diseases of the Ear	18	7
(3) Diseases of the Eye, excluding Defective Vision	30	14
(4) Diseases of the Skin:—		
Ringworm (Scalp)	—	—
Ringworm (Body)	1	1
Scabies	2	2
Impetigo	21	11
(5) Other Skin Conditions	119	119
(6) Other Conditions	211	328
	<u>1196</u>	<u>894</u>

TABLE X

INFECTIOUS DISEASES

Number of Case Exclusions notified by Head Teachers during Session
1962-1963 on account of Infectious Diseases

	Aug.-Dec.	Jan.-Mar.	April-July	Totals
	Cases	Cases	Cases	
Scarlet Fever	8	9	1	18
Diphtheria	—	—	—	—
Measles	229	770	139	1138
German Measles	—	—	—	—
Mumps	34	86	131	251
Whooping Cough	2	2	1	5
Chicken Pox	107	193	137	437
Ringworm—Scalp	—	—	—	—
Body	1	1	1	3
Impetigo	22	13	2	37
Scabies	22	11	5	38
Totals	425	1085	417	1927

TABLE XI

CHILDREN REFERRED TO SCHOOL OCULIST

	CLINICS									Total
	Bonny-rigg	Currie	Dal-keith	East Calder	Edin-burgh	Mussel-burgh	Newton-grange	Penicuik	West Calder	
Cases referred	138	119	481	65	12	193	213	215	104	1540
Attended Clinic	136	116	478	62	12	191	212	211	104	1522
Own Oculist	2	3	3	3	—	2	1	3	—	17
Refused treatment	—	—	—	—	—	—	—	1	—	1
Glasses pre-scribed	84	58	251	34	9	125	116	114	57	848
No glasses pre-scribed	52	58	227	28	3	66	96	97	47	674

TABLE XII

AUDIOMETRIC TESTING

Age Group		Number Tested	NUMBER DEFECTIVE—GRADE AS UNDER											
			I	%	II	%	IIa	%	IIb	%	III	%	Total	%
1951.	Boys	925	50	5.4	5	0.5	13	1.4	—	—	—	—	68	7.3
	Girls	809	32	3.9	1	0.1	15	1.9	—	—	—	—	48	5.9
	Total	1734	82	4.7	6	0.3	28	1.6	—	—	—	—	116	6.6
1955.	Boys	975	92	9.4	3	0.3	19	1.9	—	—	—	—	114	11.7
	Girls	924	70	7.6	2	0.2	14	1.5	—	—	—	—	86	9.3
	Total	1899	162	8.5	5	0.3	33	1.7	—	—	—	—	200	10.5
1957.	Boys	1003	59	5.9	12	1.2	37	3.7	—	—	—	—	108	10.8
	Girls	916	58	6.3	1	0.1	23	2.5	—	—	—	—	82	8.9
	Total	1919	117	6.1	13	0.7	60	3.1	—	—	—	—	190	9.9
Others	Boys	181	9	—	2	—	9	—	—	—	—	—	20	—
	Girls	141	6	—	1	—	5	—	—	—	—	—	12	—
	Total	322	15	—	3	—	14	—	—	—	—	—	32	—
Retests	Boys	530	206	—	21	—	99	—	—	—	—	—	326	—
	Girls	456	150	—	17	—	95	—	—	—	—	—	262	—
	Total	986	356	—	38	—	194	—	—	—	—	—	588	—

Defects in "Others" tested and "Retests" have not been shown as percentages as the children tested are not representative of any particular group.

TABLE XIII—ORTHOPAEDIC SERVICE—CLINICS ATTENDED BY ORTHOPAEDIC SURGEON

Centres	No. of Half-day Sessions	CHILDREN ATTENDING										All Cases Total
		New Cases				New Cases Total	Old Cases					
		Boys		Girls			Boys		Girls			
		Pre.	Sch.	Pre.	Sch.		Pre.	Sch.	Pre.	Sch.		
Bellmans Road .	1	—	1	—	3	4	—	9	8	—	8	21
Bonnynigg .	6	8	20	8	21	57	5	54	6	36	158	
Bryans .	4	10	4	11	6	31	18	45	4	27	125	
Croft Street .	6	12	6	8	5	31	16	53	10	50	160	
Cuiken .	1	—	—	—	1	1	—	14	9	—	24	
Currie .	3	7	13	5	15	40	—	—	—	—	40	
Danderhall .	1	2	1	—	1	4	2	10	1	7	24	
Dalkeith High .	2	2	2	—	1	5	—	26	—	23	54	
East Calder .	2	5	9	1	10	25	—	—	—	—	25	
Eastfield .	6	11	13	1	5	30	9	48	19	24	130	
Fisherrow .	6	6	5	3	4	18	12	63	7	69	169	
Gorebridge .	4	5	3	3	8	19	4	23	11	30	87	
Langlaw .	2	7	1	2	2	12	5	11	6	6	40	
Lasswade Primary .	1	—	—	—	—	—	—	12	8	—	20	
Lasswade Secondary .	1	—	3	1	—	4	2	20	—	4	30	
Loanhead .	5	1	5	5	5	16	8	44	7	30	105	
Musselburgh R.C. .	1	1	1	—	—	2	—	15	—	11	28	
Newbridge .	1	2	5	1	1	9	—	—	—	—	9	
Newtongrange .	2	6	3	3	2	14	5	15	2	7	43	
Newtonloan R.C. .	1	—	—	—	—	—	—	12	—	—	12	
Parkhead .	1	2	9	1	3	15	1	1	1	—	17	
Pinkie St. Peter's .	2	11	9	5	17	42	5	8	4	4	63	
Ratho .	1	—	4	—	1	5	—	—	—	—	5	
Rosewell .	1	1	1	—	—	2	—	9	8	—	19	
Roslin .	1	—	—	—	—	—	—	11	8	8	19	
Wallyford .	2	—	3	—	8	11	—	16	2	19	48	
West Calder .	2	4	29	1	8	42	1	1	—	—	43	
Whitecraig .	1	1	2	1	3	4	1	9	5	5	24	
Woodburn .	2	6	—	1	3	10	5	20	5	21	61	
Totals	69	110	152	61	130	453	97	549	89	415	1603	

TABLE XIV—ORTHOPAEDIC SERVICE—ROUTINE CLINICS ATTENDED BY PHYSIOTHERAPISTS

Centres	No. of Plasters	No. of Sessions	CHILDREN ATTENDING										All Cases Total
			Clinic Attendances						Domiciliary				
			Boys		Girls		Cl. Att. Total	Boys		Girls			
			Pre.	Sch.	Pre.	Sch.		Pre.	Sch.	Pre.	Sch.		
Bellman's Road	.	25	—	109	—	89	198	2	1	1	—	202	
Cuiken	2	25	—	135	—	87	222	—	—	—	—	222	
Eastfield	17	85	64	338	72	202	676	8	1	1	4	690	
Penicuik R.C.	.	1½	—	4	—	3	7	—	—	—	—	7	
Campie	5	44	77	329	59	155	620	2	1	—	—	623	
Danderhall	.	25	22	166	3	121	312	—	—	—	—	312	
Fisherrow	3	—	—	—	—	—	—	—	—	—	—	—	
Musselburgh Burgh	.	37	21	190	7	164	382	—	—	—	—	382	
Musselburgh Grammar	9	64	38	292	5	465	800	1	3	—	—	804	
Musselburgh R.C.	—	41	—	241	—	186	427	—	—	—	—	427	
Pinkie St. Peter's	12	65	62	236	22	286	606	—	—	—	—	606	
Wallyford	.	42	1	196	15	365	577	—	—	—	—	577	
Whitecraig	4	23	10	120	12	105	247	—	—	—	—	247	
Birkenside	—	16	—	47	4	46	97	11	—	17	—	125	
Borthwick	—	1½	1	—	—	8	9	10	—	—	—	19	
Bryans	—	58½	104	221	41	201	567	16	2	13	2	600	
Cousland	—	1½	—	—	—	—	—	5	—	6	—	11	
Cranston	—	1½	—	10	—	5	15	—	—	—	—	15	
Fountainhall	—	2	—	9	—	7	16	—	—	—	—	16	
Gorebridge	9	76½	70	240	74	263	647	63	2	20	2	734	
Greenhall	.	23	3	77	—	108	188	3	3	3	—	197	
Heriot	—	2	1	5	1	4	11	1	—	5	—	17	
Kippelaw	.	16	—	96	—	84	180	—	—	—	—	180	
Newtongrange	1	23	26	94	20	54	194	11	2	4	4	215	
Newtonloan	.	19	4	82	4	27	117	1	6	—	7	131	
Newtonloan Annexe	.	3	—	4	—	5	9	—	—	—	—	9	
Carried forward	62	720½	504	3241	339	3040	7124	134	21	70	19	7368	

TABLE XIV (Contd.)—ORTHOPAEDIC SERVICE-ROUTINE CLINICS ATTENDED BY PHYSIOTHERAPISTS

Centres	No. of Plasters	No. of Sessions	CHILDREN ATTENDING										All Cases Total
			Clinic Attendances						Domiciliary				
			Boys		Girls		Cl. Att. Total	Boys		Girls			
			Pre.	Sch.	Pre.	Sch.		Pre.	Sch.	Pre.	Sch.		
<i>Brought forward</i>	62	720 $\frac{3}{4}$	504	3241	339	3040	7124	134	21	70	19	7368	
Pathhead	—	1 $\frac{1}{4}$	—	10	—	1	11	3	—	4	—	18	
Temple	—	4	—	19	—	9	28	—	1	1	—	31	
Woodburn	—	37	12	141	14	186	353	4	—	—	1	358	
Bilston	—	6	—	36	—	13	49	—	—	1	—	50	
Bonnyrigg	—	78	50	360	33	365	808	—	1	—	—	809	
Croft Street	—	80	38	389	22	312	761	7	—	11	—	779	
Dalkeith High	2	41	—	250	—	230	480	—	1	—	—	481	
Glencorse	—	4	—	20	1	10	31	—	—	—	—	31	
Lasswade P.	—	34	—	169	—	157	326	—	—	—	—	326	
Lasswade S.S.	1	27	4	138	1	102	245	—	—	—	3	248	
Loanhead	—	63	38	307	30	151	526	4	4	4	6	544	
Rosewell	—	21	—	87	—	89	176	—	—	—	1	177	
Roslin	—	16	5	107	3	34	149	—	—	2	—	151	
Balerno	—	2 $\frac{1}{2}$	—	1	—	6	7	—	—	1	—	8	
Breich	—	7	—	11	—	11	22	2	—	3	—	27	
Currie	—	23	9	88	4	121	222	3	—	4	1	230	
East Calder R.C.	—	6	—	35	—	7	42	—	—	—	—	42	
East Calder J.S.	2	11 $\frac{1}{2}$	2	20	2	47	71	1	—	2	—	74	
Langlaw	1	25	42	82	37	98	259	13	—	19	—	291	
Mid Calder J.S.	—	15	—	18	—	28	46	5	—	5	—	56	
Mid Calder R.C.	—	$\frac{1}{2}$	—	3	—	—	3	—	—	—	—	3	
Mid Calder O.C.	—	4	—	5	—	7	12	2	—	3	—	17	
Newbridge	—	8	—	22	1	7	30	5	—	4	—	39	
Parkhead	1	19	5	176	—	10	191	7	1	12	—	211	
Ratho	—	15	2	49	—	7	58	—	—	—	—	58	
West Calder	—	19	—	153	—	72	225	—	—	1	—	226	
Totals	69	1309	711	5937	487	5120	12255	190	29	147	32	12653	

TABLE XV
ORTHOPAEDIC SERVICE
DEFECTS FOUND IN NEW CASES

Classification of Defects	Boys		Girls		Total
	Pre.	Sch.	Pre.	Sch.	
Congenital—					
Malformation—Thorax	3	8	—	4	15
Malformation—Hands	—	3	—	1	4
Malformation—Toes	—	3	—	1	4
Devarrication Recti	1	—	—	—	1
Torticollis	1	—	—	1	2
Absence of Radius and Thumb	—	1	—	—	1
Short Leg	1	3	—	2	6
Talipes Equino Varus	1	—	—	—	1
Postural Defect—					
Poor Posture	3	21	2	17	43
Scoliosis	—	—	1	1	2
Kypho Lordosis	—	2	—	—	2
Nervous System—					
Anterior Poliomyelitis	—	—	—	2	2
Cerebral Palsy	2	1	2	1	6
Cerebellar Ataxia	1	—	—	—	1
Erb-Duchenne Palsy	1	—	—	—	1
Skeletal—					
Knock Knees	45	25	28	23	121
Bow Legs	6	7	4	2	19
Flat Feet	55	68	30	39	192
Cavoid Feet	1	15	1	13	30
Hallux Valgus	—	5	1	7	13
Genu Recurvatum	2	—	1	—	3
Lax Tendo Achilles	10	7	11	—	28
Tight Tendo Achilles	—	1	—	1	2
Rotated Femorae	1	2	—	—	3
Calcaneo Valgus	2	1	—	—	3
Deformed Toes	5	6	2	2	15
Metatarsus Adductus	—	—	1	—	1
Respiratory System—					
Bronchitis	—	1	—	—	1
Asthma	—	—	—	1	1
Bone Conditions—					
Spina Bifida	—	—	—	1	1
Osteochondritis	—	1	—	—	1
Calcaneal Cyst	1	—	—	—	1
Injuries and Amputations—					
Recurring Sprained Ankle	—	1	—	—	1
Derangement Knee Joint	—	—	—	1	1
Fractured Tibia	—	1	—	—	1
Totals	142	183	84	120	529

TABLE XVI
ORTHOPAEDIC SERVICE
Numbers on Register at 31st July 1963

CENTRES	Boys		Girls		Total
	Pre.	Sch.	Pre.	Sch.	
Bellman's Road	—	20	—	18	38
Cuiken	4	24	—	15	43
Eastfield	17	49	12	31	109
Campie	19	25	7	16	67
Danderhall	4	13	1	9	27
Loretto	—	20	—	13	33
Musselburgh Burgh	6	16	2	13	37
Musselburgh Grammar	5	33	1	50	89
Pinkie	13	20	6	28	67
Wallyford	—	15	3	28	46
Whitecraig	4	12	1	11	28
Birkenside	—	4	1	4	9
Bryans	21	31	20	33	105
Cousland/Cranston	1	3	1	1	6
Gorebridge	10	27	14	34	85
Greenhall	—	13	—	15	28
Heriot/Fountainhall	—	2	1	1	4
Langlaw	13	12	11	14	50
Newtongrange	13	22	8	19	62
Newtonloan	—	18	1	6	25
Newtonloan Annexe	—	1	—	1	2
Pathhead	2	2	1	—	5
Temple/Borthwick	1	2	—	3	6
Woodburn	8	12	3	18	41
Bonnyrigg	15	62	12	65	154
Croft Street	—	52	—	37	89
Dalkeith High	—	32	—	31	63
Kippielaw	12	8	9	5	34
Lasswade Primary	—	19	—	20	39
Lasswade Senior Secondary	—	16	—	16	32
Rosewell	1	12	2	13	28
Loanhead	8	39	9	24	80
Roslin	2	38	1	16	57
Addiewell	1	—	1	—	2
Balerno	1	—	—	1	2
Currie Primary	5	9	6	7	27
Currie Secondary	—	5	—	5	10
East Calder R.C.	—	4	—	2	6
East Calder J.S.	—	1	—	4	5
East Calder Clinic	3	—	1	—	4
Kirknewton	—	1	—	—	1
Midcalder J.S.	—	1	—	—	1
Newbridge	2	3	1	1	7
Parkhead Primary	3	19	1	2	25
Pumpherston Primary	1	1	—	1	3
Ratho	1	3	—	1	5
West Calder R.C.	—	3	—	3	6
West Calder High	—	15	—	5	20
West Calder Clinic (Pre. School)	3	—	1	—	4
Woodmuir	—	1	—	1	2
Mid Calder Occupational Centre	—	—	—	1	1
Totals	199	740	138	642	1719

TABLE XVII
DENTAL INSPECTION AND TREATMENT

Number of Children who were:—

(1) Inspected by Dental Officers—

Age	Systematic Examina- tions	Special and Emergency Cases	Total
5 or under	847	103	950
6	749	106	855
7	850	106	956
8	995	98	1093
9	850	87	937
10	657	76	733
11	598	56	654
12	776	50	826
13	984	40	1024
14	849	51	900
15	288	21	309
16	113	4	117
17 or over	68	1	69
	8624	799	9423
(2) With Dental Defects	7014	799	7813
(3) Offered Treatment	6619	799	7418
(4) Number Accepting Treatment	5054	799	5853
(5) Actually treated by the School Dental Officers	5043	799	5842
(6) Number of Attendances made by children for treatment	23726	799	24525
(7) Fillings—			
(a) Permanent Teeth	14369	76	14445
(b) Temporary Teeth	2889	14	2903
(8) Extractions—			
(a) Permanent Teeth	1854	190	2044
(b) Temporary Teeth	4845	853	5698
(9) Number of administrations of a general anaesthetic for extractions	553	66	619
(10) Other Operations—			
(a) Permanent Teeth	9299	462	9761
(b) Temporary Teeth	2698	118	2816
(11) Dentures—			
(a) Partial	87	—	87
(b) Full	3	—	3
(c) Repairs	12	1	13
(12) Radiographs—			
Number of Exposures (not including Orthodontic)	97	—	97
(13) Half-days devoted to—			
Inspection	75	—	75
Treatment	3544	134	3678

N.B.—The above Table does not include Orthodontic work which is recorded elsewhere.

TABLE XVIII
DENTAL INSPECTION AND TREATMENT—AGE GROUPS

Age Group	Number Inspected	With Dental Defects		Offered Treatment		Accepting Treatment		Receiving Treatment	
		No.	%	No.	%	No.	%	No.	%
5 .	717	516	71.9	456	88.4	365	80.0	365	80.0
6 .	754	600	79.5	522	87.0	404	77.4	404	77.4
7 .	840	685	81.5	642	93.7	521	81.2	521	81.2
8 .	832	709	85.2	677	95.5	456	67.4	456	67.4
9 .	751	665	88.5	642	96.5	462	71.9	462	71.9
10 .	816	663	81.3	636	95.9	470	73.9	470	73.9
11 .	682	567	83.1	528	93.1	380	71.9	380	71.9
12 .	744	559	75.1	502	89.8	334	66.5	334	66.5
13 .	817	659	80.7	593	89.8	357	60.2	357	60.2
14 .	717	603	84.1	554	91.9	273	49.3	273	49.3
15 .	228	169	74.1	137	81.1	86	62.8	85	62.0
16 .	108	60	55.6	54	90.0	27	50.0	27	50.0
Over 16 .	80	42	52.5	39	92.8	20	51.2	20	51.2
Total or %	8086	6497	80.3	5982	92.1	4155	69.5	4154	69.4

N.B.—Only schools in which treatment has been completed are included in this Table.

TABLE XIX
DENTAL INSPECTION AND TREATMENT—SCHOOLS

School	Number Inspected	With Dental Defects		Offered Treatment		Accepting Treatment		Receiving Treatment		Untreated		Interval in Months since last Visit	% of Acceptance last Visit
		No.	%	No.	%	No.	%	No.	%	No.	%		
Currie Sec.	1205	857	71.1	827	96.5	443	53.6	442	53.4	385	46.5	21	54.9
Dalkeith R.C. Sec.	617	388	62.9	324	83.5	143	44.1	143	44.1	181	55.8	19	44.6
Danderhall	398	329	82.7	321	97.5	259	80.7	259	80.7	62	19.3	38	86.6
Eastfield	532	466	87.6	387	93.0	297	76.7	297	76.7	90	23.3	19	75.9
Gorebridge	1240	1002	80.8	944	94.2	798	84.5	798	84.5	146	15.5	29	76.2
King's Park	404	291	72.0	230	79.0	164	71.3	164	71.3	66	28.7	20	66.7
Lasswade Sec.	727	569	78.3	569	100.0	457	80.3	457	80.3	112	19.7	15	72.4
Loanhead R.C.	122	113	92.6	108	95.5	101	93.5	101	93.5	7	6.5	32	84.6
Musselburgh Gram.	790	734	92.9	605	82.4	301	49.7	301	49.7	304	50.2	22	66.8
Parkhead	467	431	92.3	428	99.3	271	63.3	271	63.3	157	36.7	—	—
Penicuik Epis.	15	15	100.0	15	100.0	14	93.3	14	93.3	1	6.6	32	85.7
Penicuik R.C.	111	106	95.5	105	99.0	90	85.7	90	85.7	15	14.3	32	90.8
Pinkie St. Peter's	526	376	71.5	372	98.9	218	58.6	218	58.6	154	41.4	30	66.9
Ratho	121	102	84.3	98	96.1	69	70.4	69	70.4	29	29.6	40	71.7
Rosewell	199	184	92.4	184	100.0	138	75.0	138	75.0	46	25.0	7	90.0
Rosewell R.C.	66	65	98.5	65	100.0	55	84.6	55	84.6	10	15.4	9	72.5
Woodburn	546	469	85.9	400	85.3	337	84.3	337	84.3	63	15.7	27	84.6
Total or %	8086	6497	80.3	5982	92.1	4155	69.5	4154	69.4	1828	30.6	24.5	72.1

N.B.—Only schools in which treatment has been completed are included in this Table.

TABLE XX
ORTHODONTIC TREATMENT

Number of Cases continued from previous year	370
New Cases	274
Cases completed	179
Cases discontinued	46
Cases continuing at end of year	419
Attendances for treatment	2591
Number of consultations with Regional Hospital Board Orthodontist	402
Number of diagnostic examinations not followed by treatment	28
Number of cases treated—	
(a) Without appliances	142
(b) With Removable appliances	113
(c) With fixed appliances	10
Number of Extractions (non-carious)—	
(a) Permanent Teeth	280
(b) Temporary Teeth	190
Repairs to Orthodontic Appliances	7
Radiographs—	
Number of Exposures	
(a) Intra-oral	120
(b) Extra-oral	160
Consultant Sessions	27
Treatment Sessions	226

TABLE XXI
TUBERCULIN TESTING OF SCHOOL LEAVERS—1949 AGE GROUP

School	No. on Roll		Refusals		No. Tested		Heaf		Negative %	
							No.			
	M.	F.	M.	F.	M.	F.	M.	F.		
Currie Secondary . . .	48	49	3	2	45	45	35	36	78	80
Dalkeith High . . .	157	151	11	7	145	140	110	116	76	83
Dalkeith R.C. . . .	96	110	12	3	82	96	56	78	68	81
East Calder J.S. . .	23	23	2	1	21	22	14	19	67	86
Greenhall	98	114	8	2	89	109	70	85	79	78
Kippelaw	3	5	—	—	3	5	3	3	100	60
Lasswade	103	103	—	1	101	93	74	75	73	81
Loanhead	30	22	2	1	28	21	19	16	68	76
Musselburgh Grammar . .	143	130	6	6	135	122	109	89	81	73
Penicuik	77	90	—	1	71	83	59	60	83	72
Roslin	2	2	—	—	2	2	2	2	100	100
West Calder High . . .	75	60	1	3	74	54	59	42	80	78
West Calder R.C. . . .	13	15	—	1	12	13	12	11	100	85
Totals	868	874	45	28	808	805	622	632	77	78

The 359 Heaf positive reactors were all X-rayed and their chests were found to be clear.

TABLE XXII
HEALTH EDUCATION TALKS—PRIMARY SCHOOLS
JULY 1962—JUNE 1963

School	Fem. Hygiene		Hygiene		Dental Health		Smoking		Home Safety		Total	
	Talks	Pupils	Talks	Pupils	Talks	Pupils	Talks	Pupils	Talks	Pupils	Talks	Pupils
East Calder	—	—	—	—	—	—	1	29	—	—	1	29
Gorebridge	—	—	—	—	5	56	—	—	—	—	5	56
King's Park	1	28	—	—	—	—	—	—	—	—	1	28
Kirknewton	—	—	—	—	—	—	1	22	—	—	1	22
Lasswade P.	—	—	8	212	—	—	—	—	—	—	8	212
Midcalder	—	—	—	—	—	—	1	29	—	—	1	29
Musselburgh Burgh	1	20	—	—	—	—	—	—	—	—	1	20
Newbridge	—	—	—	—	—	—	1	30	—	—	1	30
Pinkie St. Peter's	1	19	—	—	—	—	—	—	—	—	1	19
Rosewell	—	—	14	168	—	—	—	—	—	—	14	168
Wallyford	—	—	6	112	—	—	—	—	1	—	7	147
Whiteraig	—	—	8	80	—	—	—	—	—	—	8	80
Totals	3	67	36	572	5	56	4	110	1	35	49	840

TABLE XXIII—HEALTH EDUCATION TALKS—SECONDARY SCHOOLS

		Currie S.S.	Dalkeith High	Dalkeith St. David's	East Calder J.S.	Greenhall S.S.	Lasswade S.S.	Loanhead J.S.	Musselburgh Gram.	Penicuik S.S.	W. Calder High	W. Calder St. Mary's	Total
Hygiene I	Talks	6	6	—	—	6	—	2	—	—	—	—	14
	Pupils	—	162	—	—	106	—	86	—	—	—	—	354
Hygiene II	Talks	—	1	3	—	5	—	—	—	2	—	—	11
	Pupils	—	17	34	—	55	—	—	—	37	—	—	143
Alcohol	Talks	—	1	—	—	—	—	—	—	—	3	—	4
	Pupils	—	29	—	—	—	—	—	—	—	58	—	87
Nutrition	Pupils	—	2	—	—	—	—	—	—	—	—	—	2
	Talks	—	32	—	—	—	—	—	—	—	—	—	32
Accidents in the Home	Pupils	—	28	11	—	13	4	2	22	2	—	1	84
	Talks	350	447	306	—	275	137	147	282	651	—	37	2632
Dental Health	Pupils	—	11	2	—	—	4	1	6	3	—	—	27
	Talks	—	1253	43	—	—	373	17	76	719	—	—	2481
Smoking	Pupils	—	15	5	2	6	—	—	6	—	5	—	39
	Talks	—	385	91	58	116	—	—	87	—	92	—	829
Fem. Hygiene I	Pupils	2	7	2	2	6	7	2	10	2	2	1	43
	Talks	47	142	51	34	107	118	25	170	79	48	14	835
Fem. Hygiene II	Pupils	—	—	—	2	—	—	—	—	2	—	—	4
	Talks	—	—	—	41	—	—	—	—	37	—	—	78
Infectious Diseases	Pupils	—	—	—	2	—	7	—	—	—	5	—	14
	Talks	—	—	—	30	—	174	—	—	—	93	—	297
Mothercraft	Pupils	—	25	13	12	14	4	2	56	3	8	—	137
	Talks	—	402	196	160	151	64	34	565	58	112	—	1742
Totals	Talks	3	96	36	20	50	26	9	100	14	23	2	379
	Pupils	397	2869	721	323	810	866	309	1180	1581	403	51	9510

PEEBLESSHIRE

TABLE 1A

Number of children examined at:—

(a) Systematic Examinations		Routine Examinations	Other Systematic Examinations	Total
V.	Year Age Group (Born 1957)	174	69	243
IX.	Year Age Group (Born 1953)	166	73	239
XIII.	Year Age Group (Born 1949)	187	24	211
XVI.	Year Age Group (Born 1946)	42	2	44
		<hr/> 569	<hr/> 168	<hr/> 737
(b) Other Examinations—				
VII	Year Group—Vision only (Born 1955)	.	.	175
	Special Cases.	.	.	128
	Re-inspections by Medical Officers	.	.	32
	“Leavers”—Vocational Guidance Examinations	.	.	155
	Audiometric tests—medical follow-up	.	.	49
	Examination under Section 63 of Education (Scotland) Act. 1962	.	.	14
	Pre-Apprenticeship Pre-nursing Course Examinations.	.	.	5
	Examinations of Children requiring Transport	.	.	6
	Others	.	.	18
				<hr/> 582
(c) Notices to Parents of Children examined at Routine Inspections				
	Entrants	.	.	18
	9 years	.	.	16
	13 years	.	.	8
	16 years	.	.	3
				<hr/> 45
(d) Notices to Parents of Children examined as Specials				7
				<hr/> Total
				52

TABLE 1IA

HEIGHTS AND WEIGHTS (ROUTINE EXAMINATIONS)

		Average Age		Numbers	Average Height (ins.)	Average Weight (lbs.)
		Yrs.	Mos.			
BOYS	.	5	8	66	44.4	46.3
	.	9	8	86	52.5	67.0
	.	13	9	94	61.3	100.9
	.	16	8	29	68.9	140.7
GIRLS	.	5	8	108	43.9	43.9
	.	9	7	80	52.6	68.6
	.	13	8	93	61.5	110.3
	.	16	8	13	63.5	122.1

TABLE IIIA—SYSTEMATIC EXAMINATIONS

	ENTRANTS				IX YEAR				XIII YEAR				XVI YEAR				ALL AGES				TOTALS	
	Boys		Girls		Boys		Girls		Boys		Girls		Boys		Girls		Boys		Girls			
	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%	No.	%
No. Examined	92		151		127		112		109		102		30		14		358		379		737	
Parents Present	53	57.7	94	62.2	30	23.6	35	31.2	4	3.7	4	3.9					87	24.3	133	35.1	220	29.85
Clothing Unsatisfactory																						
Footgear Unsatisfactory																						
Vaccinated	78	84.8	135	89.2	107	84.3	99	88.4	89	81.6	86	84.3	29	96.7	13	92.9	303	84.6	333	87.9	636	86.29
Uncleanliness—Head			1	0.7			1	0.9									303	84.6	333	87.9	636	86.29
Body																			2	0.5	2	0.27
Both																						
Skin—Head—Ringworm																						
Impetigo																						
Other Diseases							1	0.9	3	2.8	1	1.0					3	0.8	2	0.5	5	0.67
Body—Ringworm																						
Impetigo																						
Scabies																						
Other Diseases	1	1.1	1	0.7	2	1.6					2	1.9					3	0.8	3	0.8	6	0.81
Nutrition—Sl. Defect			2	1.3					1	0.9							1	0.3	2	0.5	3	0.41
Bad																						
Oral Sepsis			1	0.7					1	0.9							1	0.3	1	0.3		
Nose—Obst. req. observ.	1	1.1															1	0.3	1	0.3	2	0.27
Obst. req. oper.	1	1.1															1	0.3			1	0.14
Other conditions											1	1.0							1	0.3	1	0.14
Throat—Tons req. observ.	2	2.2	4	2.6	2	1.6					1	1.0					4	1.1	5	1.3	9	1.22
Tons req. oper.	1	1.1	4	2.6													1	0.3	4	1.1	5	0.67
Glands—req. observ.	1	1.1	1	0.7													1	0.3	1	0.3	2	0.27
req. oper.																						
Vision—Fair	11	11.9	12	7.9	12	9.4	18	16.1	7	6.4	13	12.7	6	20.0	3	21.4	36	10.1	46	12.1	82	11.12
Bad			1	0.7	1	0.8	2	1.8	3	2.8	2	1.9	2	6.7	1	7.1	6	1.7	6	1.6	12	1.62
Req. refraction	1	1.1	3	2.0	2	1.6	5	4.5	3	2.8	3	2.9	1	3.3	1	7.1	7	2.0	12	3.2	19	2.58
External Eye Disease—																						
Bleph.																						
Strab.	3	3.2	1	0.7	1	0.8	2	1.8									4	1.1	3	0.8	7	0.95
Corn. Opac.																						
Conjunc.																						
Other Diseases			1	0.7					1	0.9							1	0.3	1	0.3	2	0.27
Ears—Otorrhoea																						
Other Diseases																						
Hearing—Grade I.	1	1.1	1	0.7	2	1.6											3	0.8	1	0.3	4	0.54
Grade IIa	2	2.2			1	0.8			1	0.9							4	1.1			4	0.54
Grade IIb																						
Grade III																						
Speech—Def. Art.			6	4.0															6	1.6	6	0.81
Stammer																						
Mental and Nerv. cond.—																						
Backward							1	0.9											1	0.3	1	0.14
Dull			1	0.7	1	0.8	1	0.9	1	0.9							2	0.6	2	0.5	4	0.54
Def. (Educ.)																						
Def. (Ined.)																						
Highly Nervous, etc.									1	0.9							1	0.3			1	0.14
Difficult in Behaviour					1	0.8											1	0.3			1	0.14
Heart Disease—																						
Organic—Cong.																						
Acq.			1	0.7					1	0.9							1	0.3	1	0.3	2	0.27
Functional			1	0.7	1	0.8			1	0.9	1	1.0			1	7.1	2	0.6	3	0.8	5	0.67
Lungs—Chr. Bron.																						
? Tuberculosis																						
Other Diseases			2	1.3															2	0.5	2	0.27
Deformities—																						
Congenital	2	2.2	2	1.3	1	0.8					1	1.0					3	0.8	3	0.8	6	0.81
Acquired (Infant)																						
Prob. Rickets																						
Other Causes	9	9.7	8	5.3	12	9.4	13	11.6	11	10.1	12	11.8	4	13.3			36	10.1	33	8.7	69	9.36
Infectious Diseases																						
Other Conditions	4	4.3	6	4.0	7	5.5	3	2.7	1	0.9	3	2.9	2	6.7	1	7.1	14	3.9	13	3.4	27	3.66

TABLE IVa
CLASSIFICATION OF SYSTEMATIC EXAMINATIONS

Group	ENTRANTS		2ND AGE GROUP		3RD AGE GROUP		SECONDARY AGE GROUP		TOTAL	
	No. of Children	% of Group	No. of Children	% of Group	No. of Children	% of Group	No. of Children	% of Group	No. of Children	% of All Children Examined
I .	173	71.2	168	70.3	150	71.1	24	54.6	515	69.9
IIA .	10	4.1	14	5.9	11	5.2	3	6.8	38	5.2
B .	—	—	1	0.4	—	—	—	—	1	0.1
C .	—	—	—	—	—	—	—	—	—	—
Total.	10	4.1	15	6.3	11	5.2	3	6.8	39	5.3
III .	21	8.6	9	3.8	12	5.7	2	4.5	44	5.9
IVA .	35	14.4	39	16.3	28	13.3	12	27.3	114	15.5
B .	4	1.7	8	3.3	10	4.7	3	6.8	25	3.4
Total.	39	16.1	47	19.6	38	18.0	15	34.1	139	18.9
Grand Total	243	100.0	239	100.0	211	100.0	44	100.0	737	100.0

I.—Children free from defects.

II.—Children (otherwise free from defects) who suffer from (a) Defective vision not worse than 6/12 in the better eye with or without glasses; (b) Conditions of the mouth and teeth likely to affect the general health; (c) Both (a) and (b).

III.—Children suffering from ailments (other than those mentioned in II) from which complete recovery is anticipated within a few weeks.

IV.—Children suffering from (or suspected to be suffering from) defect less remediable than defects specified in II or III, distinguishing cases—(a) Where complete cure or restoration of function (in the case of eye defect full correction) is considered possible; (b) Where improvement only is considered possible, *i.e.*, without complete restoration of function.

TABLE VA

RETURN OF ALL EXCEPTIONAL CHILDREN IN THE AREA

Disability	At Ordinary Schools	At Special School or Classes	At no School or Institution	Total
1. Blind	—	1	—	1
2. Partially sighted—				
(a) Refractive errors in which the curriculum of an ordinary school would adversely affect the eye condition	—	—	—	—
(b) Other conditions of the eye <i>e.g.</i> , cataract, ulceration, etc., which render the child unable to read ordinary school books or to see well enough to be taught in an ordinary school	—	—	—	—
3. Deaf—Grade I	94	1	—	95
" II	8	1	—	9
" IIA	38	1	—	39
" IIB	—	1	—	1
" III	—	—	—	—
4. Defective Speech—				
(a) Defects of articulation requiring special educational measures	44	2	1	47
(b) Stammering requiring special educational measures	4	—	—	4
5. Mentally Defective (children between 5 and 16 years)—				
(a) Educable (I.Q. approx 50-70)	—	6	1	7
(b) Ineducable (I.Q. generally less than 50)	—	7	2	9
6. Epilepsy—				
(a) Mild and occasional	5	—	—	5
(b) Severe (suitable for care in a residential school)	—	—	—	—
7. Physically Defective (children between 5 and 16 years)—				
(a) Non-pulmonary tuberculosis (excluding Cervical Glands)	1	—	—	1
(b) General orthopaedic conditions	240	4	2	246
(c) Organic Heart disease	10	2	1	13
(d) Other causes of ill-health	18	4	—	22
* 8. Multiple Defects	31	8	4	43
* (Included in above)				

(Included in "At Special Schools or Classes" are children at Special School outwith the County (p. 43) and Peeblesshire Children at Castlecring (p. 43).

Multiple Defects	Ordinary School	Special School	At Home	Total
3, 4 (a), 5 (b)	—	1	—	1
3, 5 (a)	—	1	—	1
3, 5 (b)	—	1	—	1
4 (a), 7 (b)	—	—	1	1
4 (a), 5 (b)	—	1	1	2
4 (a), 5 (b), 7 (c)	—	1	—	1
5 (a), 7 (c)	—	1	1	2
5 (b), 7 (b)	—	2	1	3
Others	31	—	—	31
	31	8	4	43

TABLE VIA
AMELIORATION TABLE—PHYSICAL DEFECTS

DEFECTS	No. Re- ported	TREATMENT				Not yet Visited	Left School or District
		Com- pleted	Pro- ceeding	Pro- mised	Refused		
Adenoids	1	1	—	—	—	—	—
Enlarged or Septic Tonsils	—	—	—	—	—	—	—
Skin Conditions	—	—	—	—	—	—	—
Various	7	4	1	—	—	—	2
Totals	8	5	1	—	—	—	2

TABLE VIIA
CLEANLINESS INSPECTIONS

	TERM		
	Autumn	Spring	Summer
Number Examined	1,370	—	—
Found to have Nits	6 (0.43%)	—	—
Found to have head Vermin	—	—	—
New Cases—Nits	—	—	—
New Cases—Head Vermin	—	—	—

TABLE VIIIA
AMELIORATION TABLE—UNCLEANLINESS

Number found with Vermin	Nits only	Cleansed	Improved	Not Improved	Left District
—	14	12	2	—	—

TABLE IXA
MINOR AILMENTS

Number of Children attending	89
Total Number of Attendances	198
Classification of Ailments with Attendances:—	1st Visit Re-Visit
(1) Cuts, Bruises, Sprains, Minor Injuries, etc.	56 99
(2) Diseases of the Ear	— —
(3) Diseases of the Eye, excluding Defective Vision	— —
(4) Diseases of the Skin:—	
Ringworm (Scalp)	— —
X-ray Treatment	— —
Other Treatment	— —
Ringworm (Body)	— —
Scabies	— —
Impetigo	— —
Other Skin Conditions	9 6
(5) Other Conditions	24 4
	<hr/> 89 109 <hr/>

TABLE XA
INFECTIOUS DISEASES

Number of Case Exclusions notified by Head Teacher during Session
1962-1963 on account of Infectious Diseases

	Aug.-Dec.	Jan.-Mar.	April-July	Totals
	Cases	Cases	Cases	
Scarlet Fever	—	4	2	6
Diphtheria	—	—	—	—
Measles	72	94	35	201
Mumps	242	26	—	268
German Measles	—	—	—	—
Whooping Cough	—	—	—	—
Chicken Pox	5	109	20	134
Ringworm—Scalp	—	—	1	1
Body	—	3	1	4
Impetigo	—	—	2	2
Scabies	—	—	—	—
Totals	319	236	61	616

TABLE XIa
CHILDREN REFERRED TO SCHOOL OCULIST

	CLINICS		
	Penicuik	Pecbles	Total
Cases referred	4	131	135
Attended Clinic	4	127	131
Own Oculist	—	4	4
Refused treatment	—	—	—
Glasses prescribed	3	70	73
No glasses prescribed	1	57	58

TABLE XIIIa—AUDIOMETRIC TESTING

Age Group		Number Tested	NUMBER DEFECTIVE—GRADED AS UNDER											
			I	%	II	%	IIa	%	IIb	%	III	%	Total	%
1951	Boys	91	2	2.2	—	—	3	3.3	—	—	—	—	5	5.5
	Girls	85	2	2.4	—	—	1	1.1	—	—	—	—	3	3.5
	Total	176	4	2.2	—	—	4	2.2	—	—	—	—	8	4.4
1955	Boys	85	5	5.9	1	1.2	2	2.3	—	—	—	—	8	9.4
	Girls	96	5	5.2	—	—	2	2.1	—	—	—	—	7	7.3
	Total	181	10	5.5	1	0.5	4	2.2	—	—	—	—	15	8.3
1957	Boys	66	5	7.6	2	3.0	2	3.0	—	—	—	—	9	13.6
	Girls	104	8	7.6	—	—	4	3.8	—	—	—	—	12	11.5
	Total	170	13	7.6	2	1.2	6	3.5	—	—	—	—	21	12.3
Others	Boys	18	2	—	2	—	1	—	—	—	—	—	5	—
	Girls	11	—	—	—	—	—	—	—	—	—	—	—	—
	Total	29	2	—	2	—	1	—	—	—	—	—	5	—
Retests	Boys	56	21	—	2	—	5	—	—	—	—	—	28	—
	Girls	36	8	—	1	—	8	—	—	—	—	—	17	—
	Total	92	29	—	3	—	13	—	—	—	—	—	45	—

Defects in "Others" tested and "Retests" have not been shown as percentages as the children tested are not representative of any particular age group.

TABLE XIII
ORTHOPAEDIC SERVICE—CLINICS ATTENDED BY ORTHOPAEDIC SURGEON

Centres	No. of Half-day Sessions	CHILDREN ATTENDING										All Cases Total
		New Cases					Old Cases					
		Boys		Girls		New Cases Total	Boys		Girls			
		Pre.	Sch.	Pre.	Sch.		Pre.	Sch.	Pre.	Sch.		
Broughton	1	—	—	—	—	—	—	8	—	—	2	10
Eddleston	$\frac{1}{2}$	—	2	—	—	—	—	—	—	—	4	6
Halyrude	2	—	1	1	1	3	—	9	3	6	21	
Kingsland	4	—	3	1	3	7	5	41	10	24	87	
Kirkurd and Skirling	1	—	—	—	—	—	—	2	—	—	3	5
Manor	$\frac{1}{2}$	—	1	—	—	—	—	—	—	—	1	2
Peebles High	4	—	3	—	—	3	—	39	1	5	48	
St. Ronan's	3	—	3	2	6	11	3	30	2	10	56	
Walkerburn and Lamancha	1	1	2	—	2	5	—	7	—	2	14	
West Linton and Newlands	2	—	2	—	3	5	—	12	—	10	27	
Castlecraig Residential School	19 4	1 —	17 6	4 —	15 4	37 10	8 —	148 27	16 —	67 12	276 49	
Totals	23	1	23	4	19	47	8	175	16	79	325	

TABLE XIV
ORTHOPAEDIC SERVICE—ROUTINE CLINICS ATTENDED BY PHYSIOTHERAPISTS

Centres	No. of Plasters	No. of Sessions	CHILDREN ATTENDING										All Cases Total
			Clinic Attendances						Domiciliary				
			Boys		Girls		Cl. Att. Total	Boys		Girls			
			Pre.	Sch.	Pre.	Sch.		Pre.	Sch.	Pre.	Sch.		
Broughton		10½		62	—	15	77	—	1	—	—	79	
Castle Craig	4	73½	1	429	4	218	652	2	3	—	—	657	
Eddleston		4	—	8	—	15	23	—	1	—	—	24	
Halyrude	—	6	—	18	1	14	33	—	—	1	—	34	
Kingsland	5	20½	—	58	—	87	145	1	—	1	—	147	
Kirkurd		½	—	—	—	1	1	—	—	—	—	1	
Lamancha	—	2½	—	8	—	7	15	—	—	—	—	15	
Manor	—	2	—	1	—	3	4	—	—	—	—	4	
Newlands	—	3½	—	9	—	7	16	—	—	—	—	16	
Peebles High	6	30½	1	112	20	92	225	—	3	19	2	249	
Skirling	—	4½	—	13	—	22	35	—	—	1	—	36	
Stobo	—	1½	—	2	—	1	3	—	—	—	—	3	
St. Ronan's	4	14½	—	59	—	33	92	—	2	—	2	96	
Traquair	—	½	—	1	—	—	1	—	—	—	—	1	
Walkerburn	—	½	—	2	—	—	2	—	—	—	—	2	
West Linton	1	11	—	47	—	33	80	5	5	3	2	95	
Totals	20	185	2	829	25	548	1404	8	15	26	6	1459	

TABLE XVa
ORTHOPAEDIC SERVICE — DEFECTS FOUND IN NEW CASES

Classification of Defects	Boys		Girls		Total
	Pre.	Sch.	Pre.	Sch.	
Congenital—					
Malformation Thorax	—	1	—	—	1
Malformation Toes	—	1	—	1	2
Postural Defects—					
Slack Posture	—	12	—	7	19
Sprengel's Shoulder	—	—	—	1	1
Kypho Lordosis	—	—	—	1	1
Conditions of Nervous System—					
Friedreich's Ataxia	—	—	—	1	1
Skeletal Defects—					
Knock knees	—	2	3	2	7
Flat Feet	1	1	1	1	4
Pes Cavus	—	2	—	—	2
Hallux Valgus	—	1	—	3	4
Rotated Femora	—	—	—	2	2
Lax Tendo Achilles	—	—	—	1	1
Everted Heels	—	1	—	1	2
Totals	1	21	4	21	47

TABLE XVIa
ORTHOPAEDIC SERVICE—Numbers on Register at 31st July 1963

CENTRES	Boys		Girls		Total	Waiting List
	Pre.	Sch.	Pre.	Sch.		
Broughton	—	8	—	2	10	—
Eddleston	—	2	—	2	4	—
Halyrude	—	4	—	3	7	—
Kingsland	2	11	5	11	29	—
Kirkurd	—	—	—	4	4	—
Lamancha	—	—	—	1	1	—
Leithenside	—	4	—	1	5	—
Manor	—	1	—	1	2	—
Newlands	—	1	—	1	2	—
Peebles High	—	22	—	16	38	—
Peebles R.C.	—	—	—	2	2	—
Skirling	—	2	—	3	5	—
St. Ronan's	2	11	1	10	24	—
Traquair	—	1	—	—	1	—
Tweedsmuir	1	—	—	—	1	—
Walkerburn	—	1	—	3	4	—
West Linton	—	6	1	8	15	—
Castle Craig Residential School	—	16	—	8	24	—
Totals	5	90	7	76	178	—

TABLE XVIIa
DENTAL INSPECTION AND TREATMENT

Number of Children who were:—

(1) Inspected by Dental Officers—

Age	Systematic Examina- tions	Special and Emergency Cases	Total
5 or under	129	11	140
6	120	28	148
7	182	28	210
8	175	31	206
9	212	32	244
10	179	27	206
11	189	20	209
12	135	10	145
13	57	3	60
14	70	2	72
15	21	1	22
16	—	1	1
17 or over	—	—	—
	<hr/> 1469	<hr/> 194	<hr/> 1663
(2) With Dental Defects	1243	194	1437
(3) Offered Treatment	1176	194	1370
(4) Number Accepting Treatment	994	194	1188
(5) Actually treated by the School Dental Officers	993	194	1187
(6) Number of Attendances made by children for treatment	4382	194	4576
(7) Fillings—			
(a) Permanent Teeth	2164	29	2193
(b) Temporary Teeth	813	57	870
(8) Extractions—			
(a) Permanent Teeth	261	32	293
(b) Temporary Teeth	473	106	579
(9) Number of Administrations of a General anaesthetic for extractions	32	—	32
(10) Other Operations—			
(a) Permanent Teeth	1299	79	1378
(b) Temporary Teeth	692	78	770
(11) Dentures—			
(a) Partial	1	—	1
(b) Full	—	—	—
(c) Repairs	—	—	—
(12) Radiographs—			
Number of Exposures (not including Orthodontic)	10	—	10
(13) Half-days devoted to—			
Inspection	11	—	11
Treatment	526	—	526

N.B.—The above Table does not include Orthodontic work which is recorded elsewhere.

TABLE XVIII
DENTAL INSPECTION AND TREATMENT—AGE GROUPS

Age Group	Number Inspected	With Dental Defects		Offered Treatment		Accepting Treatment		Receiving Treatment	
		No.	%	No.	%	No.	%	No.	%
5	99	79	79.8	74	93.7	52	70.3	52	70.3
6	68	48	70.6	46	95.8	39	84.8	39	84.8
7	70	55	78.5	51	92.7	46	90.2	45	88.2
8	67	58	86.5	55	94.8	52	94.5	52	94.5
9	77	63	81.8	57	90.5	44	77.2	44	77.2
10	71	63	88.7	55	87.3	48	87.3	48	87.3
11	66	48	72.7	44	91.7	41	93.2	41	93.2
12	54	41	75.9	40	97.5	33	82.5	33	82.5
13	45	39	86.7	39	100.0	36	92.3	36	92.3
14	51	41	80.4	40	97.5	37	92.5	37	92.5
15	15	13	86.7	13	100.0	7	53.8	7	53.8
16									
Over 16									
Total or %	683	548	80.2	514	93.8	435	84.6	434	84.4

N.B. Only schools in which treatment has been completed are included in this Table.

TABLE XIXA
DENTAL INSPECTION AND TREATMENT—SCHOOLS

School	Number Inspected	With Dental Defects		Offered Treatment		Accepting Treatment		Receiving Treatment		Untreated		Interval in Months since last Visit	% of Acceptance last Visit
		No.	%	No.	%	No.	%	No.	%	No.	%		
Castlecraig . . .	39	39	100.0	39	100.0	39	100.0	39	100.0	—	—	12	100.0
Kirkcud . . .	17	11	64.7	10	90.9	10	100.0	10	100.0	—	—	12	100.0
Lamancha . . .	23	20	86.9	18	90.0	18	100.0	18	100.0	—	—	12	100.0
Manor . . .	25	18	72.0	15	83.3	13	86.7	13	86.7	2	13.3	12	100.0
Newlands . . .	22	16	72.7	16	100.0	14	87.5	14	87.5	2	12.5	12	66.7
Peebles R.C. . .	74	61	82.4	51	83.6	43	84.3	43	84.3	8	15.7	53	90.9
St. Ronan's . . .	388	302	77.8	301	99.6	244	81.1	243	80.7	58	19.2	61	90.5
Skirling . . .	35	33	94.2	19	57.6	19	100.0	19	100.0	—	—	29	92.3
Stobo . . .	15	13	86.7	13	100.0	8	61.5	8	61.5	5	38.4	12	92.3
Traquair . . .	36	26	72.2	23	88.5	19	82.6	19	82.6	4	17.4	11	76.9
Tweedsmuir . . .	9	9	100.0	9	100.0	8	88.9	8	88.9	1	11.1	12	90.9
Total or % . . .	683	548	80.2	514	93.8	435	84.6	434	84.4	80	15.6	21.6	91.8

N.B.—Only schools in which treatment has been completed are included in this Table.

TABLE XXA
ORTHODONTIC TREATMENT

Number of Cases continued from previous year	58
New Cases	19
Cases completed	9
Cases discontinued	2
Cases continuing at end of year	66
Attendances for treatment	173
Number of consultations with Regional Hospital Board Orthodontist	62
Number of diagnostic examinations not followed by treatment	—
Number of cases treated—	
(a) Without appliances	48
(b) With Removable appliances	20
(c) With fixed appliances	—
Number of Extractions (non-carious)—	
(a) Permanent Teeth	14
(b) Deciduous Teeth	10
Repairs to Orthodontic Appliances	—
Radiographs—	
Number of Exposures	
(a) Intra-oral	13
(b) Ex'ra-oral	10
Consultant Sessions	3
Treatment Sessions	15

TABLE XXIA
CASTLECRAIG RESIDENTIAL SCHOOL

Inspection—

Inspected	39
With Dental Defects	39
Offered Treatment	39

Treatment—

Number treated	39
Total attendances	105
Fillings—Permanent Teeth	64
Temporary Teeth	20
Extractions—Permanent Teeth	5
Temporary Teeth	7
Other Operations—Permanent Teeth	49
Temporary Teeth	8

TABLE XXIIA
TUBERCULIN SKIN TESTING OF SCHOOL LEAVERS
1949 AGE GROUP

School	No. on Roll		Refusals		Number Tested		Mantoux Negative			
	M	F	M	F	M	F	M	F	M	F
Broughton	9	5	—	—	9	5	8	5	89	100
Peebles High	61	67	2	2	58	63	52	56	90	89
St. Ronan's	18	17	2	—	14	16	12	14	86	88
West Linton	4	4	—	—	4	2	4	2	100	100
Total	92	93	4	2	85	86	76	77	89	90

The 18 Heaf positive reactors were all X-rayed and their chests were found to be clear.

TABLE XXIII
HEALTH EDUCATION TALKS

		Peebles High	Broughton	Inner- leithen	Skirling	West Linton	Total
Hygiene I . . .	Talks	—	2	—	1	2	5
	Pupils	—	22	—	12	30	64
Hygiene II . . .	Talks	—	—	—	—	1	1
	Pupils	—	—	—	—	26	26
Alcohol . . .	Talks	—	—	—	—	—	—
	Pupils	—	—	—	—	—	—
Nutrition . . .	Talks	—	2	—	—	2	4
	Pupils	—	32	—	—	30	62
Accidents in the Home	Talks	10	1	2	—	1	14
	Pupils	513	24	57	—	26	620
Dental Health . .	Talks	—	—	—	—	1	1
	Pupils	—	—	—	—	150	150
Smoking . . .	Talks	2	—	—	—	—	2
	Pupils	88	—	—	—	—	88
Feminine Hygiene .	Talks	2	4	1	—	1	8
	Pupils	50	48	21	—	7	126
Infectious Diseases .	Talks	—	—	2	—	—	2
	Pupils	—	—	57	—	—	57
Mothercraft . . .	Talks	5	—	—	—	6	11
	Pupils	125	—	—	—	90	215
Totals .	Talks	19	9	5	1	14	48
	Pupils	776	126	135	12	359	1408

